Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF PENNSYLVANIA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Eric First name Allen Middle name Gorman Last name and Suffix (Sr., Jr., II, III)	Pamela First name Jean Middle name Gorman Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0824	xxx-xx-2241

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	253 Redwood Street	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Dauphin				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

	otor 1 otor 2					Case number (if known)				
Par	t 2:	Tell the Court About \	Your Ban	kruptcy C	ase					
7.	The	chapter of the	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy							
		sing to file under	Chapter 7							
			☐ Char							
			☐ Chap							
			☐ Char							
			_ 0							
8.	How	you will pay the fee	ab or	out how yo	ou may pay. Typica attorney is submitt	lly, if you are paying the fee yo	k with the clerk's office in your local court fo urself, you may pay with cash, cashier's che alf, your attorney may pay with a credit card	eck, or money		
					y the fee in install ee in Installments (C		n, sign and attach the Application for Individ	duals to Pay		
			☐ Ir	equest th	at my fee be waive	d (You may request this option	n only if you are filing for Chapter 7. By law, ur income is less than 150% of the official p			
							ninstallments). If you choose this option, you is form 103B) and file it with your petition.	u must fill out		
9.		you filed for	■ No.							
		ruptcy within the 3 years?	☐ Yes.							
		•		District		When	Case number			
				District		When	Case number			
				District		When	Case number			
10.		any bankruptcy	■ No							
	filed not f you,	s pending or being by a spouse who is iling this case with or by a business ner, or by an ate?	☐ Yes.							
				Debtor			Relationship to you			
				District		When	Case number, if known			
				Debtor			Relationship to you			
				District		When	Case number, if known			
11.		ou rent your lence?	■ No.	Go to	line 12.					
		· - · · - · ·	☐ Yes.	Has y	our landlord obtaine	ed an eviction judgment agains	t you?			
					No. Go to line 12.					
					Yes. Fill out <i>Initial</i> this bankruptcy pe		Judgment Against You (Form 101A) and file	it as part of		

	otor 1 Eric Allen Gorman Pamela Jean Gorn			Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Own as a Sole Prop	prietor
12. Are you a sole proprietor of any full- or part-time business?		■ No.	Go to Part 4.	
		☐ Yes.	Name and location of	business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if a	any
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City,	State & ZIP Code
	it to this petition.			e box to describe your business:
			☐ Health Care B	usiness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset R	teal Estate (as defined in 11 U.S.C. § 101(51B))
			_ ,	as defined in 11 U.S.C. § 101(53A))
			-	oker (as defined in 11 U.S.C. § 101(6))
			☐ None of the ab	oove
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	es. If you indicate that you a	the court must know whether you are a small business debtor so that it can set appropriate are a small business debtor, you must attach your most recent balance sheet, statement of and federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of <i>small</i>	■ No.	I am not filing under C	hapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chap Code.	ter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chap	ter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	y Hazardous Property or	Any Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.		
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed	J?
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

Debtor 1 Eric Allen Gorman
Debtor 2 Pamela Jean Gorman

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

■ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb Deb	tor 1 Eric Allen Gorman tor 2 Pamela Jean Gorn			Case	number (if known)		
Part	6: Answer These Quest	ions for Re	porting Purposes				
16.	What kind of debts do you have?		Are your debts primarily consult individual primarily for a personal,			U.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
				s primarily business debts? Business debts are debts that you incurred to obtain usiness or investment or through the operation of the business or investment.			
			□ No. Go to line 16c.				
			Yes. Go to line 17.				
		16c.	State the type of debts you owe th	at are not consumer debts or l	business debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	are paid that funds will be available			cluded and administrative expenses	
	are paid that funds will be available for distribution to unsecured creditors?		■ No □ Yes				
18.	How many Creditors do	1 -49		1 ,000-5,000		25,001-50,000	
	you estimate that you owe?	50-99		☐ 5001-10,000		50,001-100,000	
	□ 10 □ 20			☐ 10,001-25,000	Ш	More than100,000	
19.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 - \$10 million		\$500,000,001 - \$1 billion	
	estimate your assets to be worth?		1 - \$100,000	□ \$10,000,001 - \$50 million		\$1,000,000,001 - \$10 billion	
			01 - \$500,000 01 - \$1 million	□ \$50,000,001 - \$100 millio □ \$100,000,001 - \$500 milli		\$10,000,000,001 - \$50 billion More than \$50 billion	
20.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 - \$10 million		\$500,000,001 - \$1 billion	
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million		\$1,000,000,001 - \$10 billion	
			01 - \$500,000 01 - \$1 million	□ \$50,000,001 - \$100 millio □ \$100,000,001 - \$500 milli		\$10,000,000,001 - \$50 billion More than \$50 billion	
Part	7: Sign Below						
For	you	I have exa	amined this petition, and I declare	under penalty of perjury that th	e information pro	ovided is true and correct.	
			hosen to file under Chapter 7, I am ates Code. I understand the relief a				
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					ney to help me fill out this		
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					nis petition.		
I understand making a false statement, concealing property, or obtaining money or property by fraud in connection witl bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 134 and 3571.					ooth. 18 U.S.C. §§ 152, 1341, 1519,		
		-	Allen Gorman n Gorman		a Jean Gormaı ean Gorman	<u>n</u>	
			of Debtor 1	Signature of			
		Executed	on November 25, 2019 MM / DD / YYYY	Executed or	November MM / DD / YY		

Debtor 1 Debtor 2	Eric Allen Gorma Pamela Jean Gor		Case number (if known)				
•	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this petitio under Chapter 7, 11, 12, or 13 of title 11, United Sta for which the person is eligible. I also certify that I h	ites Code, and have e	explained the relief available under each chapter			
	not represented by ey, you do not need a page.	and, in a case in which § 707(b)(4)(D) applies, certi schedules filed with the petition is incorrect.	fy that I have no knov	vledge after an inquiry that the information in the			
	. •	/s/ Chad J. Julius	Date	November 25, 2019			
		Signature of Attorney for Debtor		MM / DD / YYYY			
		Chad J. Julius Printed name					
		Jacobson, Julius & Harshberger					
		8150 Derry Street Harrisburg, PA 17111					
		Number, Street, City, State & ZIP Code					

Email address

cjulius@ljacobsonlaw.com

Contact phone **717-909-5858**

209496 PA Bar number & State

Official Form Oase 1:19-bk-05029-\text{MWN/vary Pottion1for IFAllersh19 BalkIntered} 11/25/19 14:58:17 Desc page 7

Main Document Page 7 of 79

Fill	in this information to identify your case:			
Der	tor 1 Eric Allen Gorman First Name Middle N	ame Last Name		
1	otor 2 Pamela Jean Gorman			
(Spo	use if, filing) First Name Middle N	ame Last Name		
Unit	ted States Bankruptcy Court for the: MIDDLE DI	STRICT OF PENNSYLVANIA		
Cas	e number			
(if kn			_	heck if this is an
<u></u>			ar	nended filing
Of	ficial Form 106Sum			
Su	mmary of Your Assets and Liabi	lities and Certain Statistical Information		12/15
info	rmation. Fill out all of your schedules first; then original forms, you must fill out a new Summar	ried people are filing together, both are equally responsible for complete the information on this form. If you are filing amend y and check the box at the top of this page.		
				ur assets ue of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule	A/B	\$	252,882.00
	1b. Copy line 62, Total personal property, from Sc	hedule A/B	\$	246,635.56
	1c. Copy line 63, Total of all property on Schedule	A/B	\$	499,517.56
Par	2: Summarize Your Liabilities			
				ur liabilities ount you owe
2.	Schedule D: Creditors Who Have Claims Secured 2a. Copy the total you listed in Column A, Amount	by Property (Official Form 106D) of claim, at the bottom of the last page of Part 1 of Schedule D	\$	232,832.00
3.	Schedule E/F: Creditors Who Have Unsecured Class. Copy the total claims from Part 1 (priority unse	aims (Official Form 106E/F) ecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority	unsecured claims) from line 6j of Schedule E/F	\$	65,482.18
		Your total liabilities	\$	298,314.18
Par	3: Summarize Your Income and Expenses			
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12	of Schedule I	\$	5,236.68
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Sch	edule J	\$	5,350.54
Par	4: Answer These Questions for Administration	ve and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7	11 or 13?		
0.		the form. Check this box and submit this form to the court with yo	ur othe	r schedules.
	Yes			
7.	What kind of debt do you have?			
		Consumer debts are those "incurred by an individual primarily for out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a perso	onal, family, or

the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,198.20

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Desc

	is information to							
Debtor 1	Eric First N	Allen Go		lle Name	Last Name			
Debtor 2	Pam	ela Jean						
Spouse, if	filing) First N	ame	Midd	lle Name	Last Name			
Jnited S	tates Bankruptcy	Court for t	the: MIDDLE [DISTRIC	T OF PENNSYLVANIA			
Case nu	mber							☐ Check if this is a amended filing
Officia	al Form 1	06A/B						
Sche	edule A/	B: Pr			t only once. If an asset fits in more than	!!-	4414:	12/15
	own or have any	legal or equ	uitable interest in	any resid	dence, building, land, or similar property?			
_	Go to Part 2. Where is the prop	erty?						
Yes.		erty?		What	t is the property? Check all that apply			
Yes.		•		What	t is the property? Check all that apply Single-family home			aims or exemptions. Put
Yes.	Where is the prop	reet	ription	_	Single-family home Duplex or multi-unit building	the amount	of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i> ms Secured by Property.
Yes. 1 253 Stree	Where is the prop	reet	ription 17036-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount	t of any secure Who Have Clain	d claims on Schedule D:
Yes. 1 253 Stree	Where is the prop	reet or other descr		- 0 0	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Current va	t of any secure Who Have Clain	d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
■ Yes. 1 253 Stree	Where is the prop	reet , or other descr PA	17036-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current va entire prop	t of any secure Who Have Clais Ilue of the perty? 52,882.00 he nature of y	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$252,882.0
1 253 Stree	Where is the prop	reet , or other descr PA	17036-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current va entire prop \$25 Describe ti (such as fe a life estate	t of any secure Who Have Clain Unue of the Derty? 52,882.00 The nature of yee simple, ten e), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$252,882.0
Yes. 1 253 Stree	Where is the prop	reet , or other descr PA	17036-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current va entire prop	t of any secure Who Have Clain Unue of the Derty? 52,882.00 The nature of yee simple, ten e), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$252,882.0
Yes. 1 253 Stree	Where is the prop	reet , or other descr PA	17036-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current va entire prop \$25 Describe the subset of a life estate Fee simple.	t of any secure Who Have Clais Ilue of the perty? 52,882.00 he nature of y ee simple, ten e), if known. ple	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$252,882.0 rour ownership interest ancy by the entireties, o
Yes. 253 Stree Hu City	Where is the prop	reet , or other descr PA	17036-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current va entire prop \$25 Describe ti (such as fe a life estate Fee sim)	t of any secure Who Have Clais Ilue of the perty? 52,882.00 he nature of y ee simple, ten e), if known. ple	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$252,882.0
Yes. 1 253 Stree Hu City	Where is the prop	reet , or other descr PA	17036-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another or information you wish to add about this	Current va entire prop \$25 Describe ti (such as fe a life estate Fee simp	t of any secure Who Have Clair lue of the perty? 52,882.00 he nature of y ee simple, ten e), if known. ple	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$252,882.00 rour ownership interest ancy by the entireties, o
Yes. 1 253 Stree Hu City	Where is the prop	reet , or other descr PA	17036-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current va entire prop \$25 Describe ti a life estate Fee simp Check (see institution, such as location)	t of any secure Who Have Clais lue of the perty? 52,882.00 he nature of y ee simple, ten e), if known. ple	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$252,882.0 rour ownership interest ancy by the entireties, o
Yes. 1 253 Stree Hu City	Where is the prop	reet , or other descr PA	17036-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another or information you wish to add about this erty identification number:	Current va entire prop \$25 Describe ti a life estate Fee simp Check (see institution, such as location)	t of any secure Who Have Clais lue of the perty? 52,882.00 he nature of y ee simple, ten e), if known. ple	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$252,882.0 rour ownership interest ancy by the entireties, o

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Desc

Debtor Debtor		c Allen Gorman mela Jean Gorman		Case number (if known)	
3. Cars	s, vans, tr	ucks, tractors, sport utility ve	nicles, motorcycles		
	0				
■ Ye	es				
	Model:	Volkswagn Passat	Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any	ared claims or exemptions. Put secured claims on Schedule D: e Claims Secured by Property.
_	Approxima Other infor	2007 te mileage: 163000 mation: er NADA - Clean Retain	■ Debtor 2 only□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	Current value of the entire property?	portion you own?
	used.		☐ Check if this is community property (see instructions)	\$3,575.	.00 \$3,575.00
[·	Model: Year: Approxima Other infor	Mercedes E350 2012 te mileage: 72000 mation: er NADA statement of clean retail used.	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	the amount of any	portion you own?
	Model:	Mercedes C-240 2003 te mileage: 92000 mation:	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: e Claims Secured by Property. Current value of the portion you own?
i i i	inspections in spections in the second in th	runs but is out of on. Vehicle needs work offered as a trade. offer was \$2,800.00. rade in value 4,062.00	☐ Check if this is community property (see instructions)	\$2,800	\$2,800.00
	nples: Boa o		d other recreational vehicles, other vehicles, tercraft, fishing vessels, snowmobiles, motorcycles		
			n for all of your entries from Part 2, including hat number here	•	\$22,350.00
Part 3: Do you		Your Personal and Household Ite have any legal or equitable int	ems erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Exa □ N	amples: M	oods and furnishings ajor appliances, furniture, linens,	china, kitchenware		Julius of Scomptions.
		Normal Househ	old Goods and Furnishings		\$5,500.00
		<u></u>			

Official Form 106A/B

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Schedule A/B: Property

page 2

Best Case Bankruptcy

	otor 1 otor 2	Eric Allen Gorman Pamela Jean Gorman	Case number (if known)	
	E lectron Example ☑ No	nics es: Televisions and radios; audio, video, stereo, and digital equipment; comp including cell phones, cameras, media players, games	uters, printers, scanners; music c	ollections; electronic devices
	_	Describe		
		2 Cell phones, computer, 3 tvs, printer. ipad.		\$550.00
		bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures other collections, memorabilia, collectibles	, or other art objects; stamp, coin,	or baseball card collections;
_	_	Describe		
[Example ⊐ No	ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, por musical instruments Describe	ol tables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
		.40 Handgun; 9mm; .40 Ruger.		\$750.00
 11.	■ No □ Yes. Clothes Examp □ No	oles: Pistols, rifles, shotguns, ammunition, and related equipment Describe	5	\$500.00
		Bostor and John Bostor Glouming.		
[□No	y bles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, h Describe	eirloom jewelry, watches, gems, g	gold, silver
		Costume Jewlery and Wedding Bands		\$500.00
[Examp ■ No □ Yes.	rm animals bles: Dogs, cats, birds, horses Describe		
_	Any otl ■ No	her personal and household items you did not already list, including an	y health aids you did not list	
[☐ Yes.	Give specific information		
15.		the dollar value of all of your entries from Part 3, including any entries for the dollar value of all of your entries for the dollar value of all of your entries for the dollar value of all of your entries from Part 3, including any entries for the dollar value of all of your entries from Part 3, including any entries from Part 3.		\$7,800.00
Par	t 4: Des	scribe Your Financial Assets		

Official Form 106A/B Schedule A/B: Property

Do you own or have any legal or equitable interest in any of the following?

portion you own?

Do not deduct secured

Current value of the

page 3

	ebtor 2	Pamela Jear		an	Case number (if known)	
						claims or exemptions.
16.	■ No			our wallet, in your home,	in a safe deposit box, and on hand when you file your petition	
17.					s; certificates of deposit; shares in credit unions, brokerage house the same institution, list each.	es, and other similar
					Institution name:	
			17.1.	Checking 08	Pennsylvania Central Federal Credit Union	\$959.59
			17.2.	Savings 07	Pennsylvania Central Credit Union	\$523.80
			17.3.	Savings 10	Pennsylvania Central Credit Union	\$107.53
			17.4.	Savings - 75-10	Pennsylvania Central Credit Union	\$619.56
			17.5.	Checking -70	Pennsylvania Central Federal Credit Union	\$1,551.00
			17.6.	Savings 14-10	Pennsylvania Central Federal Credit Union	\$247.08
			17.7.	Christmas Accoun	Federal Express - Christmas Club Account	\$900.00
18.				cly traded stocks ent accounts with broker	age firms, money market accounts	
	Yes			Institution or issuer nam	ne:	
19.	joint ve		ock and	interests in incorporat	ed and unincorporated businesses, including an interest in a	an LLC, partnership, and
	■ No □ Yes. 0	Give specific info		about themme of entity:	% of ownership:	
20.	Negotial	ble instruments	include	personal checks, cashier	ole and non-negotiable instruments so' checks, promissory notes, and money orders. or to someone by signing or delivering them.	
	☐ Yes. G	ive specific info		about them uer name:		
21.		ent or pension es: Interests in I			o), thrift savings accounts, or other pension or profit-sharing plans	5
	Yes. Li	ist each accoun		tely. of account:	Institution name:	
			401(l	k)	Debtor's 401(k)	\$109,589.00
Off	icial Form	106A/B		S	chedule A/B: Property	page 4

Case 1:19-bk-05029-HWV Doc 1 Filed 11/25/19 Entered 11/25/19 14:58:17 Desc Main Document Page 13 of 79

Best Case Bankruptcy

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		401(k)	Joint Deb	tor 401(k)	\$101,988.00
22	Examples: Agreeme	used deposits you have n		inue service or use from a compartric, gas, water), telecommunication	
	■ No □ Yes		Institution na	ame or individual:	
23	Annuities (A contract No			life or for a number of years)	
24	Yes Interests in an educ	Issuer name and descrip ation IRA, in an account		gram, or under a qualified state	tuition program.
		1), 529A(b), and 529(b)(1).		
0.5	Yes			e records of any interests.11 U.S.	- ','
25	No	information about them		g listed in line 1), and rights or p	powers exercisable for your benefit
26	Patents, copyrights Examples: Internet of	, trademarks, trade sec	rets, and other intellectu proceeds from royalties an		
27	Examples: Building ■ No	es, and other general integer permits, exclusive license information about them	es, cooperative association	ı holdings, liquor licenses, profess	cional licenses
M	oney or property owe	ed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28	Tax refunds owed t ■ No	o you			
	☐ Yes. Give specific	information about them, i	ncluding whether you alrea	ady filed the returns and the tax ye	ears
29	Family support Examples: Past due No □ Yes. Give specific		ousal support, child suppo	ort, maintenance, divorce settleme	ent, property settlement
30				efits, sick pay, vacation pay, work	ers' compensation, Social Security
	☐ Yes. Give specific	information			
31	Interests in insuran Examples: Health, d ■ No		; health savings account (h	HSA); credit, homeowner's, or rent	ter's insurance
		urance company of each Company name:		Beneficiary:	Surrender or refund value:

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1 Debtor 2	Eric Allen Gorman Pamela Jean Gorman Case number (if know	n)
If you a someon	erest in property that is due you from someone who has died re the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to re has died. Give specific information	eceive property because
Examp ■ No	against third parties, whether or not you have filed a lawsuit or made a demand for payment les: Accidents, employment disputes, insurance claims, or rights to sue	
■ No	ontingent and unliquidated claims of every nature, including counterclaims of the debtor and rights Describe each claim	to set off claims
■ No	Give specific information	
	ne dollar value of all of your entries from Part 4, including any entries for pages you have attached rt 4. Write that number here	\$216,485.56
Part 5: Des	cribe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
	wn or have any legal or equitable interest in any business-related property?	
■ No. Go		
☐ Yes. G	o to line 38.	
	cribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. u own or have an interest in farmland, list it in Part 1.	
	own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
_	Go to Part 7. Go to line 47.	
□ res.	GO to line 47.	
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above	
Examp	have other property of any kind you did not already list? les: Season tickets, country club membership	
■ No □ Yes. 0	Sive specific information	
54. Add tl	ne dollar value of all of your entries from Part 7. Write that number here	\$0.00

Official Form 106A/B Schedule A/B: Property page 6

Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$252,882.00
56.	Part 2: Total vehicles, line 5		\$22,350.00		
57.	Part 3: Total personal and household items, line 15		\$7,800.00		
58.	Part 4: Total financial assets, line 36		\$216,485.56		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+ _	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$246,635.56	Copy personal property total	\$246,635.56
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$499,517.56

Fill in this infor	mation to identify your	case:		
Debtor 1	Eric Allen Gorma	n		
	First Name	Middle Name	Last Name	
Debtor 2	Pamela Jean Gor	man		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA	
Case number _ (if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt							
1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.									
☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	, , , , , , , , , , , , , , , , , ,		Specific laws that allow exemption				
		Copy the value from Schedule A/B	n Check only one box for each exemption.						
	253 Redwood Street Hummelstown, PA 17036 Dauphin County	\$252,882.00		\$41,736.00	11 U.S.C. § 522(d)(1)				
	Purchased 2011. Value based on CMA provided. Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit					
	2007 Volkswagn Passat 163000 miles Value per NADA - Clean Retain used.	\$3,575.00		\$3,575.00	11 U.S.C. § 522(d)(2)				
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit					
	2012 Mercedes E350 72000 miles	\$15,975.00		\$0.00	11 U.S.C. § 522(d)(2)				
	Value per NADA statement of value. Clean retail used. Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit					
	Normal Household Goods and Furnishings	\$5,500.00		\$5,500.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
	2 Cell phones, computer, 3 tvs, printer. ipad.	\$550.00		\$550.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit					

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 3

tor 2 Pamela Jean Gorman		Case number (i	f known)
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you cla	m Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemp	tion.
.40 Handgun; 9mm; .40 Ruger.	\$750.00	■ \$75	0.00 11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 9.1		100% of fair market value, any applicable statutory lin	
Debtor and Joint Debtor Clothing. Line from Schedule A/B: 11.1	\$500.00	■ \$50	0.00 11 U.S.C. § 522(d)(3)
		☐ 100% of fair market value, any applicable statutory lin	
Costume Jewlery and Wedding Bands	\$500.00	■ \$50	0.00 11 U.S.C. § 522(d)(4)
Line from Schedule A/B: 12.1		☐ 100% of fair market value, any applicable statutory lin	
Checking 08: Pennsylvania Central Federal Credit Union	\$959.59	\$95	9.59 11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.1		☐ 100% of fair market value, any applicable statutory lin	
Savings 07: Pennsylvania Central Credit Union	\$523.80	■ \$52	3.80 11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.2		☐ 100% of fair market value, any applicable statutory lin	
Savings 10: Pennsylvania Central Credit Union	\$107.53	■ \$10	7.53 11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.3		☐ 100% of fair market value, any applicable statutory lin	
Savings - 75-10: Pennsylvania Central Credit Union	\$619.56	■ \$61	9.56 11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.4		☐ 100% of fair market value, any applicable statutory lin	
Checking -70: Pennsylvania Central Federal Credit Union	\$1,551.00	■ \$1,55	1.00 11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.5		☐ 100% of fair market value, any applicable statutory lin	
Savings 14-10: Pennsylvania Central Federal Credit Union	\$247.08	\$24	7.08 11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.6		☐ 100% of fair market value, any applicable statutory lin	
Christmas Account: Federal Express - Christmas Club Account	\$900.00	■ \$90	0.00 11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.7		☐ 100% of fair market value, any applicable statutory lin	
401(k): Debtor's 401(k) Line from Schedule A/B: 21.1	\$109,589.00	■ \$109,58	9.00 11 U.S.C. § 522(d)(12)
		☐ 100% of fair market value,	up to

Official Form 106C

Desc

pamela Jean Gorman Pamela Jean Gorman			Case number (if known)	Case number (if known)		
	Current value of the portion you own			Specific laws that allow exemption		
	Copy the value from Check only one box for each exemption. Schedule A/B					
` '	\$101,988.00		\$101,988.00	11 U.S.C. § 522(d)(12)		
e IIOIII SCriedule AVB. 21.2			100% of fair market value, up to any applicable statutory limit			
bject to adjustment on 4/01/22 and every No	3 years after that for ca	ases fi	,	,		
	Pamela Jean Gorman of description of the property and line on medule A/B that lists this property 1(k): Joint Debtor 401(k) of from Schedule A/B: 21.2 of you claiming a homestead exemption bject to adjustment on 4/01/22 and every No Yes. Did you acquire the property cove	Pamela Jean Gorman If description of the property and line on predule A/B that lists this property Copy the value from Schedule A/B I(k): Joint Debtor 401(k) If from Schedule A/B: 21.2 If you claiming a homestead exemption of more than \$170,35 abject to adjustment on 4/01/22 and every 3 years after that for can be supposed by the exemption with the property covered by the exemption with the property cove	Pamela Jean Gorman of description of the property and line on protein you own Copy the value from Schedule A/B 1(k): Joint Debtor 401(k) of from Schedule A/B: 21.2 a you claiming a homestead exemption of more than \$170,350? abject to adjustment on 4/01/22 and every 3 years after that for cases find the property covered by the exemption within 1	Pamela Jean Gorman Case number (if known) In dedule A/B that lists this property Copy the value from Schedule A/B In (k): Joint Debtor 401(k) In from Schedule A/B: 21.2 In (k): Joint Debtor 401(k) In (k): Joint J		

Yes

FIII	in this inforr	mation to identify you	ır case:			
Deb	tor 1	Eric Allen Gorm	nan			
		First Name	Middle Name Last Name		_	
Deb	tor 2	Pamela Jean Go	orman		_	
(Spo	use if, filing)	First Name	Middle Name Last Name			
Unit	ed States Ba	inkruptcy Court for the	MIDDLE DISTRICT OF PENNSYLVANIA		_	
Cas	e number					
(if kno	own)				☐ Check	if this is an
					amend	ded filing
SC Be as	s complete and eded, copy the	D: Creditors d accurate as possible. e Additional Page, fill it	Who Have Claims Secure If two married people are filing together, both are out, number the entries, and attach it to this form.	equally responsible for	supplying correct informa	
	per (if known).	have claims secured by	vyour property?			
				Vou have nothing also	to roport on this form	
	_		his form to the court with your other schedules.	You have nothing else	to report on this form.	
	Yes. Fill ir	all of the information	below.			
Part	List A	II Secured Claims				
for e	ach claim. If m	nore than one creditor has	more than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.		Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Aes Mem	bers 1st Fcu	Describe the property that secures the claim:	\$3,401.00	\$2,800.00	\$601.00
	Creditor's Nam	е	2003 Mercedes C-240 92000 miles Vehicle runs but is out of inspection. Vehicle needs work and was offered as a trade. Highest offer was \$2,800.00. Rough trade in	<u> </u>		
	Attn: Ban		value \$1,337-\$4,062.00			
	Po Box 40	ບ :sburg, PA	As of the date you file, the claim is: Check all that			
	17055	sburg, FA	apply.			
		t, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
	Number, Street	i, Oily, State & Zip Code	☐ Disputed			
Who	owes the de	ebt? Check one.	Nature of lien. Check all that apply.			
Пг	Debtor 1 only		_	an aura d		
_	Debtor 2 only		An agreement you made (such as mortgage or s car loan)	securea		
_	Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_		the debtors and another	☐ Judgment lien from a lawsuit			
		laim relates to a	Other (including a right to offset)			
		Opened				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Last 4 digits of account number

03/17 Last Active

Date debt was incurred 9/03/19

Desc

0001

Debtor 1 Eric Allen Gorman		Case number (if known)		
First Name Middle I	Name Last Name			
Debtor 2 Pamela Jean Gorman First Name Middle I	Name - Land Name -			
First Name - Middle i	Name Last Name			
2.2 PSECU	Describe the property that secures the claim:	\$211,146.00	\$252,882.00	\$0.00
Attention: Bankruptcy Po Box 67013 Harrisburg, PA 17106	253 Redwood Street Hummelstown, PA 17036 Dauphin County Purchased 2011. Value based on CMA provided. As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	secured		
■ Debtor 1 and Debtor 2 only	\square Statutory lien (such as tax lien, mechanic's lien)			
$\hfill \square$ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 05/16 Last Active 9/26/19	Last 4 digits of account number 0516	6		
2.3 PSECU	Describe the property that secures the claim:	\$18,285.00	\$15,975.00	\$2,310.00
Creditor's Name	2012 Mercedes E350 72000 miles Value per NADA statement of value.			
B - B - 4000	Clean retail used. As of the date you file, the claim is: Check all that			
P.o. Box 1006	As of the date you file, the claim is: Check all that apply.			
Harrisburg, PA 17108	As of the date you file, the claim is: Check all that apply. Contingent	l		
	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	l		
Harrisburg, PA 17108 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	secured		
Harrisburg, PA 17108 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or steep in the claim is: Check all that apply.	secured		
Harrisburg, PA 17108 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or scar loan)	secured		
Harrisburg, PA 17108 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or scar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
Harrisburg, PA 17108 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Opened 02/18 Last Active	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or scar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
Harrisburg, PA 17108 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Opened 02/18 Last Active 9/13/19	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or scar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number 0001	1	00	
Harrisburg, PA 17108 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Opened 02/18 Last Active Date debt was incurred	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or scar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number 0001			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Fill in this inf	formation to identify your	case:			
Debtor 1	Eric Allen Gorma	n			
D 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Pamela Jean Gori	man Middle Name	Last Name		
	Pankruptov Court for the	MIDDLE DISTRICT O			
United States	Bankruptcy Court for the:	WIDDLE DISTRICT C	DE FEINING LEVAINIA		
Case number					
(if known)					Check if this is an
					amended filing
Official Fo	orm 106E/F				
	E/F: Creditors W	ho Have Unse	cured Claims		12/15
Schedule D: Creleft. Attach the name and case	editors Who Have Claims Sec Continuation Page to this pag number (if known).	ured by Property. If more e. If you have no informa	space is needed, copy t	he Part you need, fill it out, i	ecured claims that are listed in number the entries in the boxes on the op of any additional pages, write your
	t All of Your PRIORITY Un				
No. Go	editors have priority unsecure	d claims against you?			
	to Part 2.				
☐ Yes.					
Part 2: Lis	t All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any cre	editors have nonpriority unsec	ured claims against you	?		
☐ No. You	have nothing to report in this p	art. Submit this form to the	court with your other sche	dules.	
Yes.			·		
4. List all of y unsecured	claim, list the creditor separately	for each claim. For each	claim listed, identify what to	ype of claim it is. Do not list cla	or has more than one nonpriority nims already included in Part 1. If more aims fill out the Continuation Page of
					Total claim
4.1 Aes	Members 1st Fcu	Last 4 dig	gits of account number	0001	\$0.00
•	iority Creditor's Name Bankruptcy			Opened 05/04 Leet /	l ativo
	ox 40	When wa	s the debt incurred?	Opened 05/04 Last A 10/07/11	Clive
	nanicsburg, PA 17055				
	er Street City State Zip Code	As of the	date you file, the claim i	s: Check all that apply	
_	ncurred the debt? Check one.	_			
	btor 1 only	☐ Contin	-		
	btor 2 only	Unliqu			
	btor 1 and Debtor 2 only	☐ Disput		Latet	
	least one of the debtors and and		IONPRIORITY unsecured	i ciaim:	
☐ Ch debt	eck if this claim is for a comr	-		rotion agracoment or diverse the	at you did not
	claim subject to offset?		itions arising out of a sepa priority claims	ration agreement or divorce th	at you did fiot
■ No		☐ Debts	to pension or profit-sharing	g plans, and other similar debt	S
☐ Ye	s	Other	Specify Recreations	al	
•		— Cillei.	opoony		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 23

Desc

	1 Eric Allen Gorman2 Pamela Jean Gorman		Case number (if known)	
4.2	Aes Members 1st Fcu	Last 4 digits of account number	0002	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 40 Mechanicsburg, PA 17055 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim	Opened 10/17/05 Last Active 3/01/10	V
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Check Cred	dit Or Line Of Credit	
4.3	Amex/Bankruptcy Nonpriority Creditor's Name	Last 4 digits of account number	1335	\$0.00
	Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 1/06/17 Last Active 3/28/17	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.4	AT&T Mobility Nonpriority Creditor's Name	Last 4 digits of account number	5596	\$80.82
	ERC Po Box 1259, Dept 98696	When was the debt incurred?	8/15/19	
	Oaks, PA 19456 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	 Obligations arising out of a separeport as priority claims 	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Mobility Se	rvices	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 23

	1 Eric Allen Gorman 2 Pamela Jean Gorman		Case number (if known)	
			. ,	
4.5	Barclays Bank Delaware	Last 4 digits of account number	6372	\$0.00
	Nonpriority Creditor's Name Attn: Correspondence		Opened 02/15 Last Active	
	Po Box 8801	When was the debt incurred?	4/28/15	
	Wilmington, DE 19899			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Пол		
		☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Label a	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt	_		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	<u> </u>	
4.6	Barclays Bank Delaware	Last 4 digits of account number	0051	\$0.00
	Nonpriority Creditor's Name	_		******
	Attn: Correspondence		Opened 02/15 Last Active	
	Po Box 8801 Wilmington, DE 19899	When was the debt incurred?	03/15	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	☐ Yes	Other. Specify Credit Card	<u> </u>	
4.7	Barclays Bank Delaware	Last 4 digits of account number	5558	\$0.00
	Nonpriority Creditor's Name Attn: Correspondence		Opened 06/14 Last Active	
	Po Box 8801	When was the debt incurred?	4/15/15	
	Wilmington, DE 19899	_		
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card		
	00	- Other. Specify	•	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 23

			• -
Bureau of Account Managment Nonpriority Creditor's Name	Last 4 digits of account number	9451	\$556.00
3607 Rosemont Ave Ste 502		Opened 05/17 Last Active	
Po Box 8875	When was the debt incurred?	12/28/18	
Camp Hill, PA 17001 Number Street City State Zip Code	 As of the date you file, the claim i	e. Chack all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim i	5. Спеск ан тат арргу	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
⊒ Yes	·	Attorney Penn State Hershey	
Sureau of Account Managment Nonpriority Creditor's Name	Last 4 digits of account number	9452	\$415.00
3607 Rosemont Ave Ste 502 Po Box 8875	When was the debt incurred?	Opened 05/17 Last Active 1/28/19	
Camp Hill, PA 17001 Jumber Street City State Zip Code	As of the date you file, the claim i	s. Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim i	5. Спеск ан тасарру	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
- No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Collection A Medical Ce	Attorney Penn State Hershey n	
Bureau of Account Managment	Last 4 digits of account number	0237	\$0.00
Nonpriority Creditor's Name 8607 Rosemont Ave Ste 502 Po Box 8875	When was the debt incurred?	Opened 8/01/13 Last Active 11/04/13	
Camp Hill, PA 17001	— As of the data way file the elains i		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	э. Спеск ан тпат арріу	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ At least one of the deptors and another ☐ Check if this claim is for a community	Student loans		
☐ Check if this claim is for a community debt s the claim subject to offset?		ration agreement or divorce that you did not	
<u>_</u>	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
No	Debis to perision of profit-strains	g plans, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 23

Desc

Pamela Jean Gorman	Case number (if known)		
Bureau of Account Managment	Last 4 digits of account number	0690	\$0
Nonpriority Creditor's Name 3607 Rosemont Ave Ste 502 Po Box 8875 Camp Hill, PA 17001	When was the debt incurred?	Opened 7/22/13 Last Active 4/20/15	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Collection A Medical Ce	Attorney Penn State Hershey en	
Chase Card Services	Last 4 digits of account number	3481	\$0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298	When was the debt incurred?	Opened 09/12 Last Active 5/30/16	
Wilmington, DE 19850 Number Street City State Zip Code	As of the date you file, the claim		
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify Credit Card	<u> </u>	
Chase Mortgage	Last 4 digits of account number	1714	\$0
Nonpriority Creditor's Name Chase Records Center/Attn: Correspondenc	When was the debt incurred?	Opened 12/12 Last Active 5/18/16	
Mail Code LA4 5555 700 Kansas Ln Monroe, LA 71203 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	og plane, and other similar debts	
■ No	Debts to pension or profit-sharin		
Yes	Other. Specify FHA Real E	Estate Mortgage	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 23

2 Pamela Jean Gorman		Case number (if known)	
Chase Mortgage	Last 4 digits of account number	4852	\$0.
Nonpriority Creditor's Name Chase Records Center/Attn: Correspondenc Mail Code LA4 5555 700 Kansas Ln Monroe, LA 71203	When was the debt incurred?	Opened 08/03 Last Active 10/01/12	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Real Estate	e Mortgage	
ChaseHealthAdvance	Last 4 digits of account number	1312	\$0.
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298	When was the debt incurred?	Opened 10/11 Last Active 12/27/12	
Wilmington, DE 19850 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	7.5 0. 1.10 11.10 701 1.10, 1.10 0.11.11.1	or choose an area apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing		
Yes	Other. Specify Charge Acc	count	
Citibank	Last 4 digits of account number	8727	\$0.
Nonpriority Creditor's Name Attn: Recovery/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 5/26/16 Last Active 3/13/17	
St Louis, MO 63179 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	, 10 01 1110 4410 404 1110, 1110 0141111	ser encore an mar apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	and plane, and other similar debte	
■ No	Debts to pension or profit-sharin	•	
Yes	■ Other. Specify Credit Card	<u> </u>	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 23

Citibank	Last 4 digits of account number	6771	\$0.0
Nonpriority Creditor's Name Attn: Recovery/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 5/26/16 Last Active 7/29/16	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	1	
Citibank/Sears	Last 4 digits of account number	8901	\$0.0
Nonpriority Creditor's Name			
Attn: Bankruptcy Po Box 6275	When was the debt incurred?	Opened 10/23/10 Last Active 1/21/15	
Sioux Falls, SD 57117 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	,,,,,,		
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Citibank/The Home Depot	Last 4 digits of account number	1152	\$0.0
Nonpriority Creditor's Name Attn: Recovery/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 12/12 Last Active 9/04/19	
St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	og plans, and other similar debts	
No	·		
Yes	■ Other. Specify Charge Acc	count	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 23

Comenity Bank/Ann Taylor	Last 4 digits of account number When was the debt incurred?	5118 Opened 10/17 Last Active 6/28/19	\$9,185.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other Specify Credit Card	• •	
Comenity Bank/Ann Taylor	Last 4 digits of account number	1876	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 182125	When was the debt incurred?	Opened 04/17 Last Active 4/24/17	
Columbus, OH 43218 Number Street City State Zip Code	As of the date you file, the claim i		
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset? —	report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	01 ,	
Yes	Other. Specify Charge Acc	count	
Comenity Bank/Ann Taylor	Last 4 digits of account number	4965	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 04/15 Last Active 12/29/15	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharin	= :	
□Yes	■ Other. Specify Charge Acc	count	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 23

Comenity Bank/Bon Ton	Last 4 digits of account number	9831	\$0.
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125	When was the debt incurred?	Opened 12/01/10 Last Active 6/27/12	
Columbus, OH 43218 Number Street City State Zip Code	As of the date you file, the claim i		
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Charge Acc	count	
Compaint Bank/Bon Ton		7914	\$0.
Comenity Bank/Bon Ton Nonpriority Creditor's Name	Last 4 digits of account number		Φ U.
Attn: Bankruptcy	Miles and a fall of a second	Opened 08/16 Last Active	
Po Box 182125 Columbus, OH 43218	When was the debt incurred?	4/01/17	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Comenity Bank/Bon Ton	Last 4 digits of account number	8638	\$0.
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ0.
Attn: Bankruptcy Po Box 182125	When was the debt incurred?	Opened 12/01/10 Last Active 11/28/12	
Columbus, OH 43218	when was the dept incurred?	1 1/20/12	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing		
☐ Yes	■ Other. Specify Charge Acc	count	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 9 of 23

Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i	8932 Opened 07/16 Last Active 4/01/17 s: Check all that apply	\$0.00
As of the date you file, the claim i	4/01/17	
_	s: Check all that apply	
☐ Contingent	or or one an trial apply	
☐ Contingent		
☐ Unliquidated		
•	d claim:	
☐ Student loans		
	ration agreement or divorce that you did not	
☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Other. Specify Charge Acc	count	
Last 4 digits of account number	4937	\$0.0
-	Opened 02/94 Last Active	
☐ Contingent		
☐ Unliquidated		
☐ Disputed		
<u></u> '	d claim:	
report as priority claims		
, ,	• •	
Other. Specify Charge Acc	count	
	0744	\$0.00
Last 4 digits of account number		φυ.υι
When was the debt incurred?	Opened 10/13/16 Last Active 4/04/18	
As of the date you file, the claim i	s: Check all that apply	
Contingent		
· ·		
•		
·	d claim:	
☐ Student loans		
	ration agreement or divorce that you did not	
<u> </u>	g plans, and other similar debts	
·		
	□ Student loans □ Obligations arising out of a separeport as priority claims □ Debts to pension or profit-sharin ■ Other. Specify	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Charge Account Last 4 digits of account number When was the debt incurred? Opened 02/94 Last Active 9/26/19 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Charge Account Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not

Schedule E/F: Creditors Who Have Unsecured Claims

Page 10 of 23

Deptartment Store National Bank/Macy's	Last 4 digits of account number	7157	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040	When was the debt incurred?	Opened 11/23/15 Last Active 1/08/16	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other Specify Charge Acc		
Discover Financial	Last 4 digits of account number	7799	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 01/06 Last Active 10/03/11	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only ☐ Debtor 2 only	Contingent		
_	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
PSECU Nonpriority Creditor's Name	Last 4 digits of account number	0009	\$20,323.00
Attention: Bankruptcy Po Box 67013 Harrisburg, PA 17106	When was the debt incurred?	Opened 12/12 Last Active 6/14/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	■ Other. Specify Credit Card		
— 103	= Lither Shecity Citali Calu		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 11 of 23

btor 2 Pamela Jean Gorman		Case number (if known)	
PSECU	Last 4 digits of account number	0009	\$15,741.00
Nonpriority Creditor's Name Attention: Bankruptcy Po Box 67013 Harrisburg, PA 17106	When was the debt incurred?	Opened 02/11 Last Active 6/14/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card		
	Other. Specify Oreal Sure	<u> </u>	
PSECU	Last 4 digits of account number	0104	\$0.00
Nonpriority Creditor's Name Attention: Bankruptcy Po Box 67013	When was the debt incurred?	Opened 01/14 Last Active 2/27/18	
Harrisburg, PA 17106	<u></u>		
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	_		
☐ Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset? —	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	•	
Yes	Other. Specify Automobile	9	
PSECU	Last 4 digits of account number	0105	\$0.00
Nonpriority Creditor's Name		0	
P.o. Box 1006 Harrisburg, PA 17108	When was the debt incurred?	Opened 08/16 Last Active 1/26/18	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Automobile	9	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 12 of 23

Pamela Jean Gorman			
PSECU	Last 4 digits of account number	0102	\$0.
Nonpriority Creditor's Name Attention: Bankruptcy Po Box 67013	When was the debt incurred?	Opened 09/11 Last Active 4/28/16	
Harrisburg, PA 17106	mion was the assemblance.	4/20/10	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Automobile	9	
PSECU	Last 4 digits of account number	0500	\$0.
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ0.
Attention: Bankruptcy Po Box 67013	When was the debt incurred?	Opened 11/13 Last Active 5/19/16	
Harrisburg, PA 17106 Number Street City State Zip Code	As of the data way file the eleim	in Charle all that are the	
Who incurred the debt? Check one.	As of the date you file, the claim	is: Спеск ан тпат арріу	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other Specify Credit Line	Secured	
PSECU		0101	\$0.
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ0.
Attention: Bankruptcy	When we the lift was 12	Opened 07/11 Last Active	
Po Box 67013 Harrisburg, PA 17106	When was the debt incurred?	8/16/15	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing		
☐ Yes	Other. Specify Automobile	9	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 13 of 23

Pamela Jean Gorman				
PSECU	Last 4 digits of account number	0103	\$0.00	
Nonpriority Creditor's Name Attention: Bankruptcy Po Box 67013 Harrisburg, PA 17106	When was the debt incurred?	Opened 12/12 Last Active 02/13		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
Debtor 1 only	☐ Contingent ☐ Unliquidated			
Debtor 2 only				
Debtor 1 and Debtor 2 only	Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
☐ Check if this claim is for a community debt Is the claim subject to offset?				
■ No		Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	Other. Specify Automobile			
PSECU	Last 4 digits of account number	0100	\$0.00	
Nonpriority Creditor's Name Attention: Bankruptcy		Opened 02/11 Last Active	*****	
Po Box 67013	When was the debt incurred?	7/07/11		
Harrisburg, PA 17106 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.	•			
☐ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	Debts to pension or profit-sharing	\square Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify Automobile			
PSECU	Last 4 digits of account number	0101	\$0.00	
Nonpriority Creditor's Name Attention: Bankruptcy Po Box 67013 Harrisburg, PA 17106	When was the debt incurred?	Opened 07/11 Last Active 11/16/12		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	•	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims			
No	\square Debts to pension or profit-sharing plans, and other similar debts			
□Yes	Other. Specify Automobile	9		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 14 of 23

		Case number (if known)		
PSECU Nonpriority Creditor's Name Attention: Bankruptcy Po Box 67013 Harrisburg, PA 17106	Last 4 digits of account number When was the debt incurred?	0100 Opened 01/11 Last Active 7/11/11	\$0.00	
				Number Street City State Zip Code Who incurred the debt? Check one.
■ Debtor 1 only □ Debtor 2 only	☐ Contingent			
	Unliquidated			
Debtor 1 and Debtor 2 only	□ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
At least one of the debtors and another				
☐ Check if this claim is for a community debt Is the claim subject to offset?				
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts		
Yes	, ,	Other. Specify Automobile		
PennState Health	Lock A divite of account number	3843	\$3,145.3	
Nonpriority Creditor's Name	Last 4 digits of account number		φ3,143.3	
Milton S. Hershey Medical Center 90 Hope Drive, 2nd Floor	When was the debt incurred?	8/16/2019		
Hershey, PA 17033 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.	, i.e o. i.i.e aaie yeu i.i.e, ii.e oiaiii.	onook all that apply		
☐ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
Yes	■ Other Specify Medical Services various Dates			
PennState Health	Last 4 digits of account number	5989	\$2,624.0	
Nonpriority Creditor's Name			+-,	
Milton S. Hershey Medical Center 90 Hope Drive, 2nd Floor Hershey, PA 17033	When was the debt incurred?	11/15/2019		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
☐ Yes	■ Other. Specify Medical Services - Various Dates			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 15 of 23

Pamela Jean Gorman		
PennState Health	Last 4 digits of account number	\$4,450.
Nonpriority Creditor's Name Milton S. Hershey Medical Center 90 Hope Drive, 2nd Floor Hershey, PA 17033	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Various Medical Services	
PennState Health	Last 4 digits of account number	\$234.
Nonpriority Creditor's Name Milton S. Hershey Medical Center 90 Hope Drive, 2nd Floor	When was the debt incurred?	
Hershey, PA 17033 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Pyscial Therapy - November services.	
Pennsylvania Central F	Last 4 digits of account number 0002	\$0.
Nonpriority Creditor's Name	One word 20/45 Least Active	
959 E Park Dr Harrisburg, PA 17111	When was the debt incurred? Opened 09/15 Last Active 8/03/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Automobile	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 16 of 23

Pennsylvania Central F	Last 4 digits of account number	9402	\$0		
Nonpriority Creditor's Name		Opened 08/03 Last Active			
959 E Park Dr Harrisburg, PA 17111	When was the debt incurred? 11/16/12				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply			
☐ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only	□ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts			
Yes	Other. Specify Home Equi	ty Line Of Credit			
Syncb/Gap	Last 4 digits of account number	7315	\$0.		
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 8/10/06 Last Active 11/29/16			
Orlando, FL 32896	As of the date you file, the claim is: Check all that apply				
Number Street City State Zip Code Who incurred the debt? Check one.					
Debtor 1 only	O continuent				
_	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	Disputed	d alaim.			
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:			
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts			
Yes	■ Other. Specify Charge Acc				
		_			
Syncb/hhgreg Nonpriority Creditor's Name	Last 4 digits of account number	7349	\$0.		
C/o Po Box 965036 Orlando, FL 32896	When was the debt incurred?	Opened 2/28/11 Last Active 7/11/16			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
☐ Debtor 1 only	☐ Contingent				
■ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt		aration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharin	•			
Yes	Other. Specify Charge Acc	arge Account			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 17 of 23

Syncb/hhgreg	Last 4 digits of account number	5518	\$0.0		
Nonpriority Creditor's Name	_	Opened 44/24/40 Leat Active			
Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 11/21/10 Last Active 9/30/13			
Orlando, FL 32896		0/00/10			
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
No	Debts to pension or profit-sharin	g plans, and other similar debts			
Yes	Other. Specify Charge Acc	count			
Syncb/PPC	Last 4 digits of account number	9223	\$85.0		
Nonpriority Creditor's Name					
Attn: Bankruptcy		Opened 09/12 Last Active			
Po Box 965060 Orlando, FL 32896	When was the debt incurred? 8/09/19				
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	•	,			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
☐ Check if this claim is for a community	☐ Student loans				
debt	Obligations arising out of a sepa				
ls the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharin	g plans, and other similar debts			
Yes	Other. Specify Credit Card	<u> </u>			
SyncbWolf Furniture	Last 4 digits of account number	2403	\$0.0		
Nonpriority Creditor's Name	_				
Attn: Bankruptcy	W	Opened 12/13 Last Active			
Po Box 965060 Orlando, FL 32896	When was the debt incurred?	3/08/18			
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only ☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
No	☐ Debts to pension or profit-sharin	sion or profit-sharing plans, and other similar debts			
□ Yes	■ Other Specify Charge Acc	naumt			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 18 of 23

Synchrony Bank	Last 4 digits of account number	8683	\$0.
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 4/14/13 Last Active 11/29/13	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	7.5 or the date you me, the claim.	or oncor an inat appry	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Synchrony Bank/ JC Penneys	Last 4 digits of account number	4238	\$0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 956060	When was the debt incurred?	Opened 10/05/15 Last Active 11/04/15	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	u ciaiii.	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	and any agreement of all order and you are not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other. Specify Charge Acc	count	
Synchrony Bank/Amazon	Last 4 digits of account number	9937	\$0.
Nonpriority Creditor's Name Attn: Bankruptcy	_	Opened 7/10/15 Last Active	
Po Box 965060	When was the debt incurred?	2/01/16	
Orlando, FL 32896	_		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
_			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
_	Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	■ Other. Specify Charge Acc		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 19 of 23

Pamela Jean Gorman		Case number (if known)		
Synchrony Bank/Banana Republic	Last 4 digits of account number	4427	\$4,061.0	
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 05/17 Last Active 7/02/19		
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i			
☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim.		
☐ Check if this claim is for a community debt	Student loans	aration agreement or divorce that you did not		
Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	·		
Yes	■ Other. Specify Credit Card			
Synchrony Bank/Banana Republic	Last 4 digits of account number	9718	\$0.0	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 105972	When was the debt incurred?	Opened 8/28/16 Last Active 10/26/16		
Atlanta, GA 30348 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i			
☐ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims			
No	Debts to pension or profit-sharing	•		
Yes	Other. Specify Charge Acc	count		
Synchrony Bank/Banana Republic	Last 4 digits of account number	8744	\$0.0	
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 3/20/16 Last Active 10/03/16		
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated	Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured			
П от так жиз так так жиз так жиз так	☐ Student loans			
Check if this claim is for a community debt		aration agreement or divorce that you did not		
	☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 20 of 23

Synchrony Bank/Bombardier	Last 4 digits of account number	0043	\$0.0		
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	Opened 02/06 Last Active 04/16				
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply			
Who incurred the debt? Check one.	• ,				
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
Check if this claim is for a community	Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
☐ Yes	Other. Specify Charge Acc	count			
Synchrony Bank/Care Credit	Last 4 digits of account number	2338	\$0.0		
Nonpriority Creditor's Name Attn: Bankruptcy Dept	_	Opened 12/16 Last Active			
Po Box 965060 Orlando, FL 32896	When was the debt incurred?				
Number Street City State Zip Code	As of the date you file, the claim i				
Who incurred the debt? Check one.	_				
Debtor 1 only	☐ Contingent				
Debtor 2 only	Unliquidated				
Debtor 1 and Debtor 2 only	Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community debt	Student loans				
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
☐ Yes	■ Other. Specify Charge Acc	count			
Synchrony Bank/Care Credit	Last 4 digits of account number	3197	\$0.0		
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 8/11/13 Last Active 1/20/16			
Orlando, FL 32896	When was the dest mounted.	1/20/10			
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	Contingent				
☐ Debtor 2 only ☐ Unliquidated					
Debtor 1 and Debtor 2 only	Disputed	•			
At least one of the debtors and another	Type of NONPRIORITY unsecured	a ciaim:			
☐ Check if this claim is for a community debt	\square Student loans \square Obligations arising out of a separation agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims	a plane and other similar date.			
■ No	Debts to pension or profit-sharin				
Yes	Other. Specify Charge Acc	count			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 21 of 23

Synchrony Bank/Lowes	Last 4 digits of account number	0908	\$0.0	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, El 33806	Opened 2/04/11 Last Active 7/01/11			
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
☐ Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
Yes	Other. Specify Charge Acc	count		
Synchrony Bank/Lowes	Last 4 digits of account number	1402	\$0.	
Nonpriority Creditor's Name Attn: Bankruptcy	_	Opened 02/11 Last Active		
Po Box 965060 Orlando, FL 32896	When was the debt incurred?			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
Debtor 1 only	Пол			
Debtor 2 only	☐ Contingent ☐ Unliquidated			
Debtor 1 and Debtor 2 only	Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts		
Yes	■ Other. Specify Charge Acc	count		
Wells Fargo/Preferred	Last 4 digits of account number	7604	\$0.	
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 3/23/13 Last Active		
Pob 10438 Mac F8235-02f Des Moines, IA 50306	When was the debt incurred?	4/15/15		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
Debtor 1 only	☐ Contingent			
Debtor 2 only	, and Contingent			
Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
At least one of the debtors and another				
☐ Check if this claim is for a community				
debt Is the claim subject to offset?				
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
☐ Yes	■ Other. Specify Charge Acc	count		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 22 of 23

World's Foremost Bank	Last 4 digits of account number	0430	\$4,582.00
Nonpriority Creditor's Name	-		
Attn: Bankruptcy		Opened 09/14 Last Active	
4800 Nw 1st St	When was the debt incurred?	9/24/19	
Lincoln, NE 68521	_		
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	, , , , , , , , , , , , , , , , , , , ,	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	I	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				l otal Claim
6a.	Domestic support obligations	6a.	\$	0.00
6h	Taxes and certain other debts you owe the government	6h	c	0.00
	•		a	0.00
6c.	Claims for death or personal injury while you were intoxicated	6C.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim
6f.	Student loans	6f.	\$	0.00
6g.	Obligations arising out of a separation agreement or divorce that	0	•	0.00
		_	· —	
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	65,482.18
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	65,482.18
	6b. 6c. 6d. 6e. 6f. 6g. 6h. 6i.	 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6i.	6a. Domestic support obligations 6a. \$ 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this information to identify your case:							
Debtor 1	Eric Allen Gorma	n					
	First Name	Middle Name	Last Name				
Debtor 2	Pamela Jean Gor	man					
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States B	ankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA				
Case number (if known)					☐ Check if this is an amended filing		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	U.I.J		O LO. LO	2 0000	
2.0	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
	,				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in thi	s information to identify your	case:		
Debtor 1	Eric Allen Gorma	an		
D - l- 1 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, f	Pamela Jean Go First Name	rman Middle Name	Last Name	
United St	ates Bankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA	
Case nur	nber			
(if known)				☐ Check if this is an amended filing
Officia	al Form 106H			
	dule H: Your Cod	lebtors		12/15
■ No □ Ye 2. Wi Arizo □ No □ Ye 3. In Co	thin the last 8 years, have yo na, California, Idaho, Louisiana b. Go to line 3. es. Did your spouse, former spo	u lived in a community p n, Nevada, New Mexico, P nuse, or legal equivalent liv tors. Do not include you	property state or territory uerto Rico, Texas, Washin we with you at the time?	? (Community property states and territories include
Forn				G). Use Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
<u> </u>	Name			☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line
	Number Street			
	City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line
	Number Street			, · · ———
	City	State	ZIP Code	

Schedule H: Your Codebtors

Fill in this informat	ion to identify your case:	
Debtor 1	Eric Allen Gorman	
Debtor 2 (Spouse, if filing)	Pamela Jean Gorman	
United States Ban	kruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA	
Case number (If known)		Check if this is: ☐ An amended filing
		☐ A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	<u>rm 106l</u>	MM / DD/ YYYY
Schedule	I: Your Income	12/15
•	nd accurate as possible. If two married people are filing together (Deb	

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment								
1.	Fill in your employment information.		Debtor 1		Debtor 2 or non-filling spouse				
	If you have more than one job, attach a separate page with	Employment status	■ Emplo	yed	■ Employed				
	information about additional	p.:0,	☐ Not en	nployed	☐ Not employed				
	employers.	Occupation	Operation	ons Supervisor	Driver				
	Include part-time, seasonal, or self-employed work.	Employer's name	Hershey Medical Center 500 University Drive Hershey, PA 17033		Federal Express				
	Occupation may include student or homemaker, if it applies.	Employer's address			30 FedEx Pkwa, 2nd Fl Horiz Collierville, TN 38017				
		How long employed th	ere?	4 months	33 years				
Par	Part 2: Give Details About Monthly Income								

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

				For Debtor 1		Debtor 2 or filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	4,333.00	\$	2,865.20
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$_	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$	4,333.00	\$	2,865.20

Official Form 106l Schedule I: Your Income page 1

Case number (if known)

					For Debtor 1			Debtor 2 or -filing spou		
	Сору	y line 4 here	4.	\$	4,333.00		\$	2,865		
5.	l iet s	all payroll deductions:								
J.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1 205 00		\$	400	.60	
	5b.	Mandatory contributions for retirement plans	5b.	\$-	1,205.00 0.00		\$.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	•	\$		3.65	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00		\$_		.00	
	5e.	Insurance	5e.	\$	0.00	•	<u>\$</u> —	247		
	5f.	Domestic support obligations	5f.	\$	0.00		\$.00	
	5g.	Union dues	5g.	\$	0.00		\$.00	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+	\$.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,205.00		\$	756	5.52	
7.	Calcu	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	3,128.00		\$	2,108	3.68	
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00		\$	o	0.00	
	8b.	Interest and dividends	8b.	\$-	0.00		\$_		.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00		* \$		0.00	
	8d.	Unemployment compensation	8d.	\$	0.00		\$.00	
	8e.	Social Security	8e.	\$	0.00	-	\$.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	•	\$		0.00	
	8g.	Pension or retirement income	_ 8g.	\$	0.00	•	\$	0	.00	
	8h.	Other monthly income. Specify:	8h.+	- \$	0.00	+	\$	0	.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00		\$_		0.00	
10.	Calcı	ulate monthly income. Add line 7 + line 9.	10. \$		3,128.00 + \$		2.1	108.68 =	3	5,236.68
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					,			,
11.	Includ other	e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your of friends or relatives. of include any amounts already included in lines 2-10 or amounts that are not a lify:	depen			•		Schedule J. 11. +\$		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines						12. \$		5,236.68
									mbin nthly	ed income
13.	Do yo	ou expect an increase or decrease within the year after you file this form? No.	?							
		Yes. Explain:								

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:							
Deb	otor 1	Eric Allen G	orman			Cł	neck	if this is:		
							l A	n amended filing		
	otor 2	Pamela Jean	Gorman	1				supplement show 3 expenses as of t	ring postpetition chap	ter
(Spo	ouse, if filing)						1	3 expenses as or i	ne following date:	
Unit	ted States Bankr	ruptcy Court for the	: MIDDL	E DISTRICT OF PENNSY	LVANIA		N	MM / DD / YYYY		
!	se number (nown)									
O	fficial Fo	rm 106J								
S	chedule	J: Your	Exper	ises						12/15
Be info	as complete a ormation. If m mber (if know	and accurate as lore space is ne n). Answer evel	possible eded, atta ry questio	. If two married people and the control of the cont						
Par 1.	tt 1: Descr Is this a joir	ibe Your House	hold							
١.	☐ No. Go to	line 2.								
	Yes. Doe	s Debtor 2 live	in a separ	ate household?						
	■ N □ Y	-	st file Offici	al Form 106J-2, Expenses	s for Separate House	hold of D	ebto	or 2.		
2.	Do you have	e dependents?	п.,	. ,	,					
۷.	Do you nave		□ No	Fill out this information for	Dependent's relati	anchin ta		Dependent's	Does dependent	
	Debtor 2.	ebtor rand	■ Yes.	each dependent	Debtor 1 or Debtor			age	live with you?	
	Do not state				D 14				□ No	
	dependents	names.			Daughter				■ Yes	
									□ No □ Yes	
							—		□ Yes	
									☐ Yes	
									□ No	
									☐ Yes	
3.	expenses of	penses include f people other t d your depende	han _	No Yes						
Est exp	timate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp						
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> Y				Your expe	enses	
•		,				_				
4.		or home owners and any rent for th		ses for your residence. I or lot.	nclude first mortgage	4.	\$		1,520.00	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b.			0.00	
		•	•	upkeep expenses		4c.			100.00	
_		owner's associat			and the second of	4d.			0.00	
5.	Additional r	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00	

Official Form 106J Schedule J: Your Expenses page 1

	tor 1 tor 2	Eric Alle Pamela J				Case number (if known)				
6.	Utiliti	ies:								
-	6a.		heat,	natural gas			6a.	\$	185.00	
	6b.	Water, sev	ver, ga	arbage collection			6b.	\$	145.00	
	6c.	Telephone	e, cell p	phone, Internet, sat	ellite, and cable service	S	6c.	\$	150.00	
	6d.	Other. Spe	ecify:	Oil Heat (Budg	et Plan)		6d.	\$	245.00	
		Cable	-		,			\$	89.00	
7.	Food	and house	ekeep	ing supplies				\$	650.00	
8.			_	en's education cos	sts		8.	\$	0.00	
9.	Cloth	ning, laundi	ry, an	d dry cleaning			9.	\$	150.00	
10.		-	-	ts and services			10.	\$	125.00	
11.		cal and der					11.	\$	180.00	
12.	Trans	sportation.	Includ	de gas, maintenanc	e, bus or train fare.			· 		
		ot include ca			.,		12.	\$	410.00	
13.	Enter	rtainment, o	clubs,	, recreation, news	papers, magazines, an	d books	13.	\$	100.00	
14.	Chari	itable conti	ributio	ons and religious	donations		14.	\$	368.00	
15.	Insur	ance.								
				ce deducted from y	our pay or included in lir	nes 4 or 20.				
		Life insura					15a.	·	163.00	
		Health insu					15b.	*	0.00	
	15c.	Vehicle ins	suranc	e			15c.	\$	210.00	
		Other insu		· · ·			15d.	\$	0.00	
	Speci	ify:			m your pay or included i	n lines 4 or 20.	16.	\$	0.00	
17.		Ilment or le					47-	•		
		Car payme					17a.	·	389.54	
		Car payme		or Vehicle 2			17b.	·	121.00	
		Other. Spe	-				17c.	·	0.00	
		Other. Spe	•				17d.	\$	0.00	
18.					e, and support that yo		18.	\$	0.00	
10					edule I, Your Income (C		10.	\$		
19.	Speci		you	make to support of	thers who do not live	with you.	19.	Φ	0.00	
20			orty o	vnenses not inclu	ded in lines 4 or 5 of th	is form or on School		our Incomo		
20.				her property	ueu III IIIIes 4 01 3 01 ti	iis ioiiii oi oii s <i>ch</i> ed	20a.		0.00	
		Real estate					20b.	· -	0.00	
				owner's, or renter's	insurance		20c.		0.00	
				pair, and upkeep e			20d.	·	0.00	
				ssociation or condo	•		20d. 20e.	·		
21					minium dues			·	0.00	
۷١.	Otnei	r: Specify:	Pet	Expenses			21.	+\$	50.00	
22.	Calcu	ulate your r	month	ly expenses						
	22a. A	Add lines 4	throug	gh 21.				\$	5,350.54	
	22b. (Copy line 22	2 (mor	nthly expenses for I	Debtor 2), if any, from O	fficial Form 106J-2		\$		
					our monthly expenses.			\$	5,350.54	
23.	Calcu	ulate your r	month	ly net income.						
	23a.	Copy line	12 <i>(y</i> o	our combined month	nly income) from Schedu	le I.	23a.	\$	5,236.68	
				hly expenses from I			23b.	-\$	5,350.54	
		. , , ,		-						
	23c.			onthly expenses from the second of the secon	m your monthly income		23c.	\$	-113.86	
24.	For ex modifie	cample, do yo cation to the	terms o		in your expenses with your car loan within the yea				e or decrease because of a	
	☐ Ye	2 S.	ı ⊏xpla	alli fiere.						

Fill in this infor	rmation to identify your	case.				
Debtor 1	Eric Allen Gorma					
Jebioi i	First Name	Middle Name	La	st Name		
Debtor 2	Pamela Jean Goi	man e				
Spouse if, filing)	First Name	Middle Name	La	st Name		
Jnited States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYL	/ANIA		
Case number						
if known)						Check if this is an amended filing
ou must file th btaining mone	is form whenever you f	n connection with a bank	or amend	ed sche	dules. Making a false state	ement, concealing property, or 00, or imprisonment for up to 20
Sig	ın Below					
Did you pa	ay or agree to pay some	eone who is NOT an attor	ney to help	you fil	out bankruptcy forms?	
■ No						
☐ Yes.	Name of person					kruptcy Petition Preparer's Notice,
					Deciaration	, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and s	schedul	es filed with this declaration	on and
X /s/ Erio	c Allen Gorman		х	/s/ Pa	mela Jean Gorman	
	llen Gorman				la Jean Gorman	
Signatu	ure of Debtor 1			Signat	ure of Debtor 2	
Date _	November 25, 2019			Date	November 25, 2019	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

F-211 -	in this inform					
		nation to identify you				
Deb	tor 1	Eric Allen Gorma	Middle Name	Last Name		
	tor 2	Pamela Jean Go				
(Spot	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF P	ENNSYLVANIA		
Cas (if kno	e number				_	Check if this is an mended filing
Sta Be as	s complete a	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup additional pages, write you	
Part		Details About Your Ma r current marital statu	rital Status and Where You	Lived Before		
	■ No	ast 3 years, have you	lived anywhere other than to	·	<i>i</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
state	s and territor	es include Arizona, Ca		vada, New Mexico, Puerto R	ity property state or territory ico, Texas, Washington and W	
Part	2 Explai	n the Sources of You	r Income			
	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$26,166.78	■ Wages, commissions, bonuses, tips	\$31,517.30
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	lendar year: to December	31, 2018)	☐ Wages, commissions, bonuses, tips			nmissions,	\$39,493.63
			☐ Operating a business		☐ Operating a	business	
	endar year be to December		☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, combonuses, tips	ımissions,	\$0.00
			☐ Operating a business		☐ Operating a	business	
and oth winning List each	er public bene is. If you are fil ch source and	fit payments; ping a joint case	pensions; rental income; inte e and you have income that	amples of other income are a rest; dividends; money collection you received together, list it outlety. Do not include income to	cted from lawsuits; only once under Do	royalties; and ebtor 1.	
			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Part 3: L	ist Certain Pa	yments You	Made Before You Filed for	Bankruptcy			
6. Are eitl	her Debtor 1's Neither D individual During the No. Yes * Subject	s or Debtor 2's ebtor 1 nor Deprimarily for a 90 days befor Go to line 7. List below e paid that create not include pto adjustment or Debtor 2 or 90 days befor 90 days befor 2 or Debtor	s debts primarily consume ebtor 2 has primarily consipersonal, family, or househore you filed for bankruptcy, dach creditor to whom you partitor. Do not include payments to an attorney for ton 4/01/22 and every 3 years both have primarily consider you filed for bankruptcy, description 2 has been supported by the second of	r debts? umer debts. Consumer debt ild purpose." id you pay any creditor a tota id a total of \$6,825* or more ints for domestic support obliq his bankruptcy case. 's after that for cases filed on	al of \$6,825* or mo in one or more pay gations, such as ch or after the date c	re? /ments and th nild support a of adjustment.	he total amount you and alimony. Also, do
	■ No.	include payr	ach creditor to whom you pa	id a total of \$600 or more and bligations, such as child sup			
Credit	or's Name an	d Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this p	payment for

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 otor 2	Eric Allen Gorman Pamela Jean Gorman		Cas	e number (if kno	own)	
7.	<i>Inside</i> of whi	n 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partner of their voting	erships of which g securities; an	n you are a genera d any managing a	al partner; corporations agent, including one for
		No Yes. List all payments to an insider.					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount yo still ow		this payment
8.	inside Includ	le payments on debts guaranteed or cos		ments or transfer a	any property o	n account of a d	ebt that benefited an
		No					
		Yes. List all payments to an insider der's Name and Address	Dates of payment	Total amount	Amount yo		this payment
	t 4:	Identify Legal Actions, Repossession		para	Juli Ou	unolado oroc	and a name
	modifi	Il such matters, including personal injury ications, and contract disputes. No Yes. Fill in the details.	Nature of the case	Court or agency		Status of the	ŕ
		e number	Nature of the oase	oourt or agency		Olulus of th	10 0000
10.	Check	n 1 year before you filed for bankrupto k all that apply and fill in the details belov No. Go to line 11. Yes. Fill in the information below.		rty repossessed, f	oreclosed, gai	rnished, attache	d, seized, or levied?
		litor Name and Address	Describe the Property		Da	ate	Value of the
			Explain what happened	l			property
11.	accol	n 90 days before you filed for bankrup unts or refuse to make a payment beca No Yes. Fill in the details.		uding a bank or fir	nancial institut	tion, set off any a	amounts from your
	Cred	litor Name and Address	Describe the action the	creditor took		ate action was ken	Amount
12.	court	n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a No Yes		rty in the possess	ion of an assiç	gnee for the ben	efit of creditors, a
Par		List Certain Gifts and Contributions		and the state banks	-6	Φ000 ··· ··· ··· ··· ··· ··· ··· ··· ···	•
13.	I	n 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	tcy, did you give any gifts	s with a total value	or more than	ֆουυ per person	<i>(</i>
	Gifts per p	s with a total value of more than \$600 person	Describe the gifts			ates you gave e gifts	Value
		on to Whom You Gave the Gift and ress:					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	ptor 2 Pamela Jean Gorman			Case number (if known)				
14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or or	• •	, , , , ,	ns with a total	value of more than	\$600 to any charity?		
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	total	Describe what you contributed		Dates you contributed	Value		
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankru or gambling?	uptcy or	since you filed for bankruptcy, did y	you lose anytl	ning because of thef	t, fire, other disaster,		
	■ No							
	Yes. Fill in the details.	_						
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the log the amount that insurance has paid. I nce claims on line 33 of <i>Schedule A/B:</i>	_ist pending	Date of your loss	Value of property lost		
Par	t 7: List Certain Payments or Transfer							
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No Yes. Fill in the details.	prepari	ng a bankruptcy petition?		, , ,	rty to anyone you		
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any property transferred		Date payment or transfer was made	Amount of payment		
	Jacobson, Julius & Harshberger 8150 Derry Street Harrisburg, PA 17111			11/25/2019 - Balance of \$500.00 owing.	\$1,000.00			
17.	Within 1 year before you filed for bankrupromised to help you deal with your cree Do not include any payment or transfer that	ditors o	r to make payments to your creditor		r transfer any prope	rty to anyone who		
	■ No□ Yes. Fill in the details.							
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for banks transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have all No Yes. Fill in the details.	ur busin s made	ness or financial affairs? as security (such as the granting of a s		erty to anyone, othe			
	Person Who Received Transfer Address		Description and value of property transferred					
	Person's relationship to you			paid iii ext	Jiidiige			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Description and value of the property transferred Date Transfer was									
	Name of trust	Description and value of the p	Description and value of the property transferred							
Par	8: List of Certain Financial Accounts, Instru	uments, Safe Deposit Boxes, and	Storage Units							
	Within 1 year before you filed for bankruptcy, v	were any financial accounts or ins	truments held in	your name, or for yo	ur benefit, closed,					
	Include checking, savings, money market, or o houses, pension funds, cooperatives, associated. No			ıres in banks, credit	unions, brokerage					
	Yes. Fill in the details.									
		ast 4 digits of Type of acc ccount number instrument	clos	e account was sed, sold, ved, or ssferred	Last balance before closing or transfer					
	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?									
	No									
	Yes. Fill in the details. Name of Financial Institution	Who else had access to it?	Describe the c	ontents	Do you still					
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	Describe the C	oments	have it?					
22.	_									
	■ No									
	Yes. Fill in the details.	M/hl h h - l	December the co		D					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the c	ontents	Do you still have it?					
Par	9: Identify Property You Hold or Control for	r Someone Else								
	Do you hold or control any property that some for someone.	one else owns? Include any prop	erty you borrowed	d from, are storing fo	or, or hold in trust					
	■ No □ Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the p	roperty	Value					
Par	10: Give Details About Environmental Inform	,								
For t	he purpose of Part 10, the following definitions	s apply:								
	Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, grou	• .	•						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	•	l law, whether yo	u now own, operate,	or utilize it or used					
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	nmental law defines as a hazardo	ıs waste, hazardo	ous substance, toxic	substance,					
Repo	ort all notices, releases, and proceedings that y	you know about, regardless of wh	en they occurred.							

Statement of Financial Affairs for Individuals Filing for Bankruptcy

24.	Has	any governmental unit notified you that	you may be liable or potentially liable	unde	r or in violation of an environm	ental law?			
		No Yea Fill in the details							
		Yes. Fill in the details. me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		nvironmental law, if you now it	Date of notice			
25.	Hav	e you notified any governmental unit of	any release of hazardous material?						
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		nvironmental law, if you now it	Date of notice			
26.	Hav	e you been a party in any judicial or adn	ninistrative proceeding under any envi	ironme	ental law? Include settlements	and orders.			
		No Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Natu	re of the case	Status of the case			
Par	t 11:	Give Details About Your Business or	Connections to Any Business						
27.	Witl	nin 4 years before you filed for bankrupt	cy, did you own a business or have ar	ny of th	ne following connections to an	y business?			
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
		☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	ip (LLI	P)				
		☐ A partner in a partnership							
		☐ An officer, director, or managing ex	ecutive of a corporation						
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation						
		No. None of the above applies. Go to F	Part 12.						
		Yes. Check all that apply above and fill	in the details below for each business	s.					
		siness Name	Describe the nature of the business		Employer Identification number				
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security Dates business existed	number or ITIN.			
28.		nin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement	to any	one about your business? Incl	ude all financial			
		No Yes. Fill in the details below.							
		me dress mber, Street, City, State and ZIP Code)	Date Issued						

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1	Eric Allen Gorman		
Debtor 2	Pamela Jean Gorman		Case number (if known)
Part 12:	Sign Below		
are true a		statement,	nd any attachments, and I declare under penalty of perjury that the answers concealing property, or obtaining money or property by fraud in connection prisonment for up to 20 years, or both.
/s/ Eric	Allen Gorman	/s/ Pa	mela Jean Gorman
Eric Alle	en Gorman	Pame	la Jean Gorman
Signatur	e of Debtor 1	Signat	ure of Debtor 2
Date N	lovember 25, 2019	Date	November 25, 2019
Did you a ■ No □ Yes	ttach additional pages to Your Statement of I	Financial A	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you p ■ No	ay or agree to pay someone who is not an att	orney to h	nelp you fill out bankruptcy forms?
☐ Yes. N	ame of Person Attach the Bankruptcy Pe	etition Prep	parer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inform	mation to identify your case:		
Debtor 1	Eric Allen Gorman		
	First Name Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Pamela Jean Gorman First Name Middle Name	Last Name	
United States Ba	Inkruptcy Court for the: MIDDLE DISTRIC	CT OF PENNSYLVANIA	
Case number (if known)			☐ Check if this is an amended filing
Official Fo Stateme r		viduals Filing Under Chapte	er 7 12/15
-	ividual filing under chapter 7, you must fi e claims secured by your property, or	Il out this form if:	
You must file thi	ever is earlier, unless the court extends the	not expired. r you file your bankruptcy petition or by the date se ne time for cause. You must also send copies to the	
	eople are filing together in a joint case, bo nd date the form.	oth are equally responsible for supplying correct in	formation. Both debtors must
write ye	our name and case number (if known).	s needed, attach a separate sheet to this form. On	the top of any additional pages,
1. For any credite		D: Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
information be Identify the cre	editor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's A	es Members 1st Fcu	☐ Surrender the property.☐ Retain the property and redeem it.	■ No
Description of	2003 Mercedes C-240 92000 miles	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	Vahiala runa hut ia aut af	☐ Retain the property and [explain]:	_
Creditor's P name:	SECU	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
Description of property securing debt:	Hummelstown, PA 17036	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	☐ Yes

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Best Case Bankruptcy

Debtor 1 Eric Allen Gorman Debtor 2 Pamela Jean Gorman		Case number (if known)
Creditor's PSECU name:	☐ Surrender the	ne property.
Description of property securing debt: 2012 Mercedes E350 72000 miles Value per NADA statement of value. Clean retail used.	Reaffirmation	roperty and enter into a on Agreement. roperty and [explain]:
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in the information below. Do not list real estate leases. Un You may assume an unexpired personal property lease if	nexpired leases are	executory Contracts and Unexpired Leases (Official Form 106G), fill re leases that are still in effect; the lease period has not yet ended. not assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No
Topony.		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my property that is subject to an unexpired lease.	y intention about a	any property of my estate that secures a debt and any personal
X /s/ Eric Allen Gorman	x /	/s/ Pamela Jean Gorman
Eric Allen Gorman Signature of Debtor 1		Pamela Jean Gorman Signature of Debtor 2
Date November 25, 2019	Date	November 25, 2019

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Best Case Bankruptcy

Fill in	this information to identify your case:					irected	in this form and	in Form
Debto	r 1 Eric Allen Gorman		12	2A-1Sı	ipp:			
Debto (Spouse	r 2 Pamela Jean Gorman			□ 1. T	here is no pres	umptio	n of abuse	
	d States Bankruptcy Court for the: Middle District of	of Pennsylvania		á		nade ur	mine if a presum nder <i>Chapter 7 N</i> rm 122A-2).	
(if know	number n)			□ з. т	he Means Test	does n	ot apply now be e but it could ap	
				☐ Ch	eck if this is a	n ame	nded filing	
Offic	cial Form 122A - 1							
Cha	pter 7 Statement of Your Cu	urrent Mor	nthly Inc	com	е			10/19
attach a	complete and accurate as possible. If two married peop a separate sheet to this form. Include the line number to umber (if known). If you believe that you are exempted in military service, complete and file Statement of Exe	o which the additior from a presumption	nal information of abuse becau	applies. ise you	On the top of a	ny addit narily c	ional pages, write onsumer debts or	e your name and because of
	What is your marital and filing status? Check one	only.						
	☐ Not married . Fill out Column A, lines 2-11.							
	Married and your spouse is filing with you. Fill	out both Columns	A and B, lines	2-11.				
	\square Married and your spouse is NOT filing with yo	u. You and your s	spouse are:					
	☐ Living in the same household and are not le	gally separated.	Fill out both Co	olumns	A and B, lines 2	2-11.		
	Living separately or are legally separated. F penalty of perjury that you and your spouse ar living apart for reasons that do not include eva	e legally separated	d under nonbar	nkruptc	/ law that appli	es or th		
101 the	in the average monthly income that you received from (10A). For example, if you are filing on September 15, the 6 months, add the income for all 6 months and divide the to uses own the same rental property, put the income from that	6-month period would otal by 6. Fill in the res	be March 1 thro sult. Do not inclu	ough Aug ide any i	ust 31. If the amo	ount of your	our monthly incom once. For exampl	e varied during e, if both
				Colun		Debt	mn B or 2 or filing spouse	
p	Your gross wages, salary, tips, bonuses, overtime payroll deductions).		•	\$	4,333.00	\$	2,865.20	
	Alimony and maintenance payments. Do not inclu Column B is filled in.	de payments from	a spouse if	\$	0.00	\$	0.00	
fi a	All amounts from any source which are regularly of you or your dependents, including child support or an unmarried partner, members of your househ and roommates. Include regular contributions from a lilled in. Do not include payments you listed on line 3	ort. Include regular nold, your dependen a spouse only if Col	contributions nts, parents,	\$	0.00	\$	0.00	
i	Net income from operating a business, profession						-	
			otor 1					
	Gross receipts (before all deductions)	\$ 0.00						
	Ordinary and necessary operating expenses	-\$ 0.00		•	0.00	•	0.00	
	Net monthly income from a business, profession, or	farm \$	Copy here ->	• \$	0.00	\$	0.00	
6. N	Net income from rental and other real property	Dala	stor 1					
	Description (hafana all de le disconsideration)	\$ 0.00	otor 1					
	Gross receipts (before all deductions)	-\$ 0.00						
(Ordinary and necessary operating expenses	-ψ 0.00						

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

0.00 Copy here -> \$

0.00

0.00

page 1

7. Interest, dividends, and royalties

Net monthly income from rental or other real property

Desc

0.00

0.00

				Column A Debtor 1		Column B Debtor 2 o		
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount he Social Security Act. Instead, list it here:	t received was a benef	it under					-
	For you\$	0.0	00					
	For your spouse \$	0.0	00					
9.	Pension or retirement income. Do not include any and benefit under the Social Security Act. Also, except as a not include any compensation, pension, pay, annuity, of United States Government in connection with a disability disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that does not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chap	stated in the next senter or allowance paid by the ty, combat-related injur- ces. If you received any pay only to the extent to u would otherwise be e	nce, do e ry or retired hat it	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social streceived as a victim of a war crime, a crime against hur domestic terrorism; or compensation, pension, pay, an United States Government in connection with a disability, or death of a member of the uniformed service sources on a separate page and put the total below.	Security Act; payments manity, or international nuity, or allowance paid ty, combat-related injur	or d by the ry or					
				\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	_
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	_
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total for Column B total	otal for Column B.	\$	4,333.00	+ \$_	2,865.20	Total incor	7,198.20
	Calculate your current monthly income for the year							
12.	12a. Copy your total current monthly income from line	•		Сор	y line 11	here=>	\$	7,198.20
	Multiply by 12 (the number of months in a year)						X	12
	12b. The result is your annual income for this part of the	e form				12b	o. \$	86,378.40
13.	Calculate the median family income that applies to	you. Follow these step	s:					
	Fill in the state in which you live.	PA						
	Fill in the number of people in your household.	3						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link sp	pecified	in the separ	ate instru	13. ctions	\$	82,375.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. C Go to Part 3.	on the top of page 1, ch	eck box	1, There is	no presui	mption of abus	se.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2,	The pre	esumption o	of abuse is	determined b	y Form	122A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information or	this sta	atement and	I in any at	tachments is t	rue and	correct.
	X /s/ Eric Allen Gorman Eric Allen Gorman			ela Jean (Jean Gor				
	Signature of Debtor 1			e of Debtor				

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2

Debtor 1 Debtor 2	Eric Allen Gorman Pamela Jean Gorman		Case number (if known)	
Da	te November 25, 2019	Date	November 25, 2019	
	MM / DD / YYYY		MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A-2.			

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Fill in this information to identify your case:				
Debtor 1	Eric Allen Gorman			
Debtor 2 Pamela Jean Gorman (Spouse, if filing)				
United States B	ankruptcy Court for the:	Middle District of Pennsylvania		
Case number(if known)				

Check the appropriate box as directed in lines 40 or 42:

According to the calculations required by this Statement:

1. There is no presumption of abuse.

☐ Check if this is an amended filing

Official Form 122A - 2

Chapter 7 Means Test Calculation

04/19

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Par	1: Determine Your Adjusted Income					
1.	Copy your total current monthly income. Co	py line 11 from Official	Form 122A	-1 here=>	\$	7,198.20
2.	Did you fill out Column B in Part 1 of Form 122A-1? ☐ No. Fill in \$0 for the total on line 3. ☐ Yes. Is your spouse Filing with you? ☐ No. Go to line 3. ☐ Yes. Fill in \$0 for the total on line 3.					
3.	Adjust your current monthly income by subtracting any part household expenses of you or your dependents. Follow these On line 11, Column B of Form 122A–1, was any amount of the irrexpenses of you or your dependents? No. Fill in 0 for the total on line 3. Yes. Fill in the information below:	e steps:			ed for the	household
	State each purpose for which the income was used For example, the income is used to pay your spouse's tax support other than you or your dependents.	debt or to are su your s	the amount btracting fr pouse's inc	om		
		•				
	Total.	\$	0.00	Copy total here:	=> - \$	0.00
4.	Adjust your current monthly income. Subtract line 3 from line	1.			\$	7,198.20

Official Form 122A-2

Chapter 7 Means Test Calculation

Part 2:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

3

National Standards

You must use the IRS National Standards to answer the guestions in lines 6-7.

Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1,446.00

Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older-because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person 55.00
- 7b. Number of people who are under 65
- 7c. Subtotal. Multiply line 7a by line 7b. 165.00 Copy here=> \$

People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person 114.00
- 7e. Number of people who are 65 or older 0
- \$ 7f. **Subtotal.** Multiply line 7d by line 7e. 0.00 Copy here=> 0.00
- 7g. Total. Add line 7c and line 7f 165.00 Copy total here=> 165.00

Eric Allen Gorman Debtor 1 Pamela Jean Gorman Debtor 2

Case number (if known)

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S.	Trustee Program has divided the IRS Local Standard for housing for
bankruptcy purposes into two parts:	

- Housing and utilities Insurance and operating expenses
- Housing and utilities Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart.

To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 627.00 in the dollar amount listed for your county for insurance and operating expenses.

Housing and utilities - Mortgage or rent expenses:

9a. Using the number of people you entered in line 5, fill in the dollar amount 1,132.00 listed for your county for mortgage or rent expenses.....

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of the creditor	Average monthly payment
PSECU	\$ 1,520.00

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 0.00 0.00 or rent expense). If this amount is less than \$0, enter \$0. here=>

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim.

Explain why:

11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.

☐ 0. Go to line 14.

☐ 1. Go to line 12.

2 or more. Go to line 12.

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

474.00

Official Form 122A-2

Chapter 7 Means Test Calculation

	You may		pense: Using the IRS Local if you do not make any loan						
Ve	hicle 1	Describe Vehicle 1:	2012 Mercedes E350 7 of value. Clean retail u		s Value pei	r NADA sta	atement		
13a	. Ownersh	nip or leasing costs using	g IRS Local Standard			\$	508.00		
13b	•	monthly payment for all	debts secured by Vehicle 1 vehicles.						
	are contr		y payment here and on line cured creditor in the 60 mon			at			
	Nan	me of each creditor for	Vehicle 1	Average payment					
	P S	BECU		\$	233.40				
		Total A	overage Monthly Payment	\$	233.40	Copy here =>	-\$ 233 .	Repeat this amount on line 33b.	
13c		cle 1 ownership or lease line 13b from line 13a. i	e expense if this amount is less than \$0), enter \$0.		\$	274.60	Copy net Vehicle 1 expense here => \$	274.60
Ve	ehicle 2	Describe Vehicle 2:	2003 Mercedes C-240 sinspection. Vehicle ne Highest offer was \$2,8 \$1,337-\$4,062.00	eds work	and was of	ffered as a			
13d	. Ownersh	nip or leasing costs using	g IRS Local Standard			\$	508.00		
13e	. Average leased ve		debts secured by Vehicle 2	. Do not inc	lude costs fo	r			
	Nan	me of each creditor for	Vehicle 2	Average payment	monthly				
				Jan. Jan. 1					
	Aes	s Members 1st Fcu		\$\$	24.40				
	Aes		verage Monthly Payment			Copy here => -\$	24.40	Repeat this amount on line 33c.	
13f.	Net Vehi	Total A		\$\$ \$	24.40	here => -\$	24.40	amount on	483.60
	Net Vehi Subtract	Total Acceptable from line 13d. in an apportation expense	e expense	\$\$, , enter \$0	24.40 24.40	here => -\$ \$	483.60	amount on line 33c. Copy net Vehicle 2 expense here => \$	483.60 0.00

Official Form 122A-2

Chapter 7 Means Test Calculation

page 4

Best Case Bankruptcy

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Debtor 1 Debtor 2 Debtor 1 Debtor 2

Oth	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	self-employment taxes, soc your pay for these taxes. Ho	mount that you will actually owe for federal, state and local taxes, such as income taxes, ial security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12 om the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, s	sales, or use taxes.	\$	1,574.00
17.	Involuntary deductions: T contributions, union dues, a	he total monthly payroll deductions that your job requires, such as retirement nd uniform costs.		
	Do not include amounts tha	t are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	filing together, include paym	nonthly premiums that you pay for your own term life insurance. If two married people are nents that you make for your spouse's term life insurance. Do not include premiums for life nts, for a non-filing spouse's life insurance, or for any form of life insurance other than	\$	163.00
19.		The total monthly amount that you pay as required by the order of a court or as spousal or child support payments.		
	Do not include payments or	past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total month as a condition for your jo	nly amount that you pay for education that is either required:		
		ntally challenged dependent child if no public education is available for similar services.	\$	0.00
			Ť —	
21.		ly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.	\$	0.00
	Do not include payments fo	r any elementary or secondary school education.	ъ	0.00
22.	that is required for the healt	penses, excluding insurance costs: The monthly amount that you pay for health care h and welfare of you or your dependents and that is not reimbursed by insurance or paid t. Include only the amount that is more than the total entered in line 7.		
	Payments for health insurar	nce or health savings accounts should be listed only in line 25.	\$	0.00
23.	for you and your dependent	elephone services: The total monthly amount that you pay for telecommunication services s, such as pagers, call waiting, caller identification, special long distance, or business cell necessary for your health and welfare or that of your dependents or for the production of ed by your employer.		
		r basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses al Add lines 6 through 23.	lowed under the IRS expense allowances.	\$	5,207.20

Debtor 1 Debtor 2

Add	Additional Expense Deductions These are additional deductions allowed by the Means Test.						
	Note: Do not include any expense allowances listed in lines 6-24.						
25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, o your dependents.						r	
	Health insurance \$ 256.00						
	Disability in	surance	\$0.0	0			
	Health savir	ngs account	+ \$0.0	0			
	Total		\$ 256.	00	Copy total here=>	\$	256.00
	Do you actu	ually spend this total amount?					
	_	How much do you actually spend?	Φ.				
	Yes		\$				
26.	continue to your housel	contributions to the care of household of pay for the reasonable and necessary care hold or member of your immediate family w	and support of an ho is unable to pay	elderly for su	r, chronically ill, or disabled member of ch expenses. These expenses may	•	0.00
		tributions to an account of a qualified ABLE		•	` '	\$	0.00
27.		against family violence. The reasonably u and your family under the Family Violence					
	By law, the	court must keep the nature of these expens	ses confidential.			\$	0.00
28.	18. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8.				nsurance and operating expenses on		
		ve that you have home energy costs that are the excess amount of home energy costs.		me en	ergy costs included in expenses on line		
		ive your case trustee documentation of you med is reasonable and necessary.	r actual expenses,	and yo	ou must show that the additional	\$	0.00
29.	\$170.83* pe	expenses for dependent children who a er child) that you pay for your dependent ch entary or secondary school.					
		ive your case trustee documentation of you easonable and necessary and not already					
	* Subject to	adjustment on 4/01/22, and every 3 years	after that for cases	begur	on or after the date of adjustment.	\$	0.00
30.	higher than	food and clothing expense. The monthly the combined food and clothing allowance the food and clothing allowances in the IRS	s in the IRS Nation	al Stan			
		art showing the maximum additional allowator this form. This chart may also be availa	-	-	·		
	You must sh	how that the additional amount claimed is r	easonable and nec	essary		\$	0.00
31.		charitable contributions. The amount the to a religious or charitable organization. 26			tribute in the form of cash or financial	+\$	322.53
32.		the additional expense deductions. 5 through 31.				\$	578.53

33 F	ctions for Debt Payment					
	or debts that are secured by an intercons, and other secured debt, fill in li	est in property that you own, including ho nes 33a through 33e.	me mor	tgages, vehicle		
	o calculate the total average monthly pareditor in the 60 months after you file for	ayment, add all amounts that are contractuall r bankruptcy. Then divide by 60.	y due to	each secured		
	Mortgages on your home:					verage monthly ayment
33a.	Copy line 9b here				=> \$	1,520.00
	Loans on your first two vehicles:					
33b.	Copy line 13b here			:	=> \$	233.40
33c.					=> \$	24.40
33d.	List other secured debts:					
Name	of each creditor for other secured debt	Identify property that secures the debt		Does paymen include taxes insurance?		
				□ No		
	-NONE-			☐ Yes	\$	
				_	* ,	
				□ No		
					\$	
				□ No		
				☐ Yes	. •	
		<u> </u>			+\$ _.	
					Сору	
33e.	Total average monthly payment. Add I	inga 22a through 22d	\$	1,777.80	total	
	Total average monthly payment. Add t	ines ssa inibugh ssu	ĮΨ	,	here=>	\$ 1,777.80
			Ľ-		here=>	\$ 1,777.80
34. A	re any debts that you listed in line 33	B secured by your primary residence, a ve	hicle,	,	here=>	\$ 1,777.80
34. A o :	are any debts that you listed in line 33 r other property necessary for your s		hicle,		here=>	\$ 1,777.80
34. A o l	re any debts that you listed in line 33 r other property necessary for your s No. Go to line 35. Yes. State any amount that you must	B secured by your primary residence, a vesupport or the support of your dependents st pay to a creditor, in addition to the payments so ion of your property (called the cure amount)	hicle,	,	here=>	\$ 1,777.80
34. A ol	re any debts that you listed in line 33 r other property necessary for your s No. Go to line 35. Yes. State any amount that you mus listed in line 33, to keep posses	B secured by your primary residence, a vesupport or the support of your dependents st pay to a creditor, in addition to the payments so ion of your property (called the cure amount)	hicle,	Total cure amount	here=>	Monthly cure amount
34. A o	re any debts that you listed in line 33 r other property necessary for your s No. Go to line 35. Yes. State any amount that you mus listed in line 33, to keep posses. Next, divide by 60 and fill in the	A secured by your primary residence, a vesupport or the support of your dependents st pay to a creditor, in addition to the payment ssion of your property (called the <i>cure amount</i> to information below.	hicle, 6? ts	Total cure amount		Monthly cure
34. A o	In any debts that you listed in line 33 or other property necessary for your solution. No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the ne of the creditor.	A secured by your primary residence, a vesupport or the support of your dependents st pay to a creditor, in addition to the payment ssion of your property (called the <i>cure amount</i> to information below.	hicle, 6? ts	Total cure amount	here=>	Monthly cure
34. A o	In any debts that you listed in line 33 or other property necessary for your solution. No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the ne of the creditor.	A secured by your primary residence, a vesupport or the support of your dependents st pay to a creditor, in addition to the payment ssion of your property (called the <i>cure amount</i> to information below.	hicle, 6? ts	Total cure amount	÷60 = \$	Monthly cure
34. A o	In any debts that you listed in line 33 or other property necessary for your solution. No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the ne of the creditor.	S secured by your primary residence, a vesupport or the support of your dependents st pay to a creditor, in addition to the payments sion of your property (called the cure amount information below. Identify property that secures the debt	ts	Total cure amount	÷ 60 = \$ Copy total	Monthly cure amount
34. A o	In any debts that you listed in line 33 or other property necessary for your solution. No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the ne of the creditor.	S secured by your primary residence, a vesupport or the support of your dependents st pay to a creditor, in addition to the payments sion of your property (called the cure amount information below. Identify property that secures the debt	hicle, s? ts	Total cure amount	÷ 60 = \$	Monthly cure amount
34. A ol	In any debts that you listed in line 33 or other property necessary for your self. No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep posses. Next, divide by 60 and fill in the self of the creditor. DNE-	S secured by your primary residence, a vesupport or the support of your dependents at pay to a creditor, in addition to the paymer ssion of your property (called the cure amound information below. Identify property that secures the debt	ts nt).	Total cure amount	÷ 60 = \$ Copy total	Monthly cure amount
34. A ol	re any debts that you listed in line 33 r other property necessary for your set. No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the ne of the creditor. DNE- To you owe any priority claims such a re past due as of the filling date of your set.	S secured by your primary residence, a vesupport or the support of your dependents at pay to a creditor, in addition to the paymer ssion of your property (called the cure amound information below. Identify property that secures the debt	ts nt).	Total cure amount	÷ 60 = \$ Copy total	Monthly cure amount
34. A ol	re any debts that you listed in line 33 r other property necessary for your set. No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the ne of the creditor. DNE- To you owe any priority claims such a re past due as of the filling date of your No. Go to line 36.	s secured by your primary residence, a vesupport or the support of your dependents at pay to a creditor, in addition to the paymer ssion of your property (called the cure amound information below. Identify property that secures the debt The sa priority tax, child support, or alimony or bankruptcy case? 11 U.S.C. § 507.	ts nt).	Total cure amount	÷ 60 = \$ Copy total	Monthly cure amount

eblori	ric Allen Gorman amela Jean Gorman		Case r	umber (<i>if known</i>)		
For m	ou eligible to file a case under Chapter 13? 11 U.S.C. § 1 nore information, go online using the link for Bankruptcy Bas ctions for this form. Bankruptcy Basics may also be available	ics specified					
■ No	o. Go to line 37.						
☐ Ye	es. Fill in the following information.						
	Projected monthly plan payment if you were filing unde	r Chapter 1	3 \$				
	Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for di and North Carolina) or by the Executive Office for Unite (for all other districts).	istricts in Ala	abama				
	To find a list of district multipliers that includes your dist the link specified in the separate instructions for this for be available at the bankruptcy clerk's office.				Con	oy total	
	Average monthly administrative expense if you were fill	ng under C	hapter 13	\$		e=> \$	
	all of the deductions for debt payment. lines 33e through 36.					\$	1,777.80
Total Dec	ductions from Income						
38. Add a	all of the allowed deductions.						
	y line 24, All of the expenses allowed under IRS ense allowances	\$	5,207.20				
Copy	y line 32, All of the additional expense deductions	\$	578.53				
Copy	y line 37, All of the deductions for debt payment	+\$	1,777.80				
	Total deductions	\$	7,563.53	Copy total	here=	=> \$	7,563.53
Part 3:	Determine Whether There is a Presumption of Abuse						
39. Calcu	late monthly disposable income for 60 months						
39a.	Copy line 4, adjusted current monthly income	\$	7,198.20				
39b.	Copy line 38, Total deductions	-\$	7,563.53				
39c.	Monthly disposable income. 11 U.S.C. § 707(b)(2). Subtract line 39b from line 39a	\$	-365.33	Copy here=>\$		-365.33	
For t	the next 60 months (5 years)				x 60		
39d.	Total. Multiply line 39c by 60	39d.	\$	1,919.80	Copy here=>	\$	-21,919.80
40. Find 6	out whether there is a presumption of abuse. Check the	box that ap	plies:		J		
■ Th	ne line 39d is less than \$8,175*. On the top of page 1 of th	is form, che	eck box 1, There	e is no presu	mption of a	buse. Go to	Part 5.
	ne line 39d is more than \$13,650*. On the top of page 1 of art 4 if you claim special circumstances. Go to Part 5.	this form, c	heck box 2, The	ere is a pres	umption of a	abuse. You	may fill out
□ти	ne line 39d is at least \$8,175*, but not more than \$13,650)*. Go to line	e 41.				
	ect to adjustment on 4/01/22, and every 3 years after that fo			date of adia	etment		

Official Form 122A-2

Chapter 7 Means Test Calculation

page 9

Best Case Bankruptcy

btor 1 btor 2	Pamela Jean Gorman			ase number (if known)			
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. I A Summary of Your Assets and Liabilities and Certain Statistical Schedules (Official Form 106Sum), you may refer to line 3b on the	Information	\$.25		
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 70 Multiply line 41a by 0.25		\$		Copy here=>	\$
259	% of y	ne whether the income you have left over after subtracting all rour unsecured, nonpriority debt. e box that applies:		ictions is	s enough to	pay	
_	Go to	39d is less than line 41b. On the top of page 1 of this form, checo Part 5.39d is equal to or more than line 41b. On the top of page 1 of the tamption of abuse. You may fill out Part 4 if you claim special circuit	nis form, check	box 2, <i>Ti</i>	here is a	fabuse.	
rt 4:	Giv	ve Details About Special Circumstances					
■ N	lo. Go es. Fil	e alternative? 11 U.S.C. § 707(b)(2)(B). to Part 5. I in the following information. All figures should reflect your averagm. You may include expenses you listed in line 25.	e monthly exp	ense or in	ncome adjus	tment for ea	ach
	ne	ou must give a detailed explanation of the special circumstances the cessary and reasonable. You must also give your case trustee do justments.					
	G	Sive a detailed explanation of the special circumstances			onthly expe adjustment		
	_			\$			
				\$			
				\$			
				\$			
	_			—			
rt 5:	_	ın Below					
	By si	gning here, I declare under penalty of perjury that the information	on this stateme	ent and in	any attachr	nents is true	e and correct.
			/s/ Pamela .				
		ric Allen Gorman gnature of Debtor 1	Pamela Jea Signature of D		an		
Dat	te No	-	November 2	25, 2019)		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapt	ter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 2

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Middle District of Pennsylvania

In re	Eric Allen Gorman Pamela Jean Gorman		Case No.	
	Tamola coan coman	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	SATION OF ATTOR	RNEY FOR DE	EBTOR(S)
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(1) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,500.00
	Prior to the filing of this statement I have received			1,000.00
	Balance Due			500.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. ′	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name			
5.	In return for the above-disclosed fee, I have agreed to rer	nder legal service for all aspect	s of the bankruptcy c	ase, including:
1	 Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed] 	ment of affairs and plan which rs and confirmation hearing, ar	may be required; and any adjourned hea	rings thereof;
	Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou	ns as needed; preparation		
6 . I	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
N	ovember 25, 2019	/s/ Chad J. Julius	i .	
D	ate	Chad J. Julius		
		Signature of Attorne Jacobson, Julius		
		8150 Derry Street	:	
		Harrisburg, PA 17	7111	
		717-909-5858 Fa		
		<u>cjulius@ljacobso</u> Name of law firm	IIIAW.COIN	
		ivanie oj iaw jiini		

United States Bankruptcy Court Middle District of Pennsylvania

In re	Eric Allen Gorman Pamela Jean Gorman		Case No.	
		Debtor(s)	Chapter	7
	VEDIE	FICATION OF CREDITOR	MATDIV	
	VERIF	ICATION OF CREDITOR	WAIKIX	
Planala	and Dakton hander wife the	4 4h		of their language day
ine ab	ove-named Debtors hereby verify that	t the attached list of creditors is true and co	orrect to the best	of their knowledge.
Date:	November 25, 2019	/s/ Eric Allen Gorman		
		Eric Allen Gorman		
		Signature of Debtor		
Date:	November 25, 2019	/s/ Pamela Jean Gorman		
		Pamela Jean Gorman		

Signature of Debtor